## State of Nevada Board of Psychological Examiners 3080 South Durango Drive, Suite 102 | Las Vegas, Nevada 89117

## psyexam.nv.gov nbop@govmail.state.nv.us

## REQUEST TO RECEIVE BOARD MEETING AGENDA

Date:_	
Name:	
Agency	/;
Addres	<i>SS:</i>
City:	State Zip Code:
EMAIL.	: □ Email notification preferred
	<ul> <li>Requests must be made every 6 months</li> <li>Pursuant to NRS 241.020 (4)(c), a request for mailed notice of meetings automatically lapses six months after it is made to the public body. The public body must inform the requester of this fact by enclosure or notation.</li> </ul>
Interes	sted in notification of:
	Regular Board Meetings
	Board Sub-Committees
	Regulation Sub-Committees

<sup>\*</sup> Please return the completed form to the above address or email address \*