



National Association of Activity Professionals
CREDENTIALING CENTER

NAAP Credentialing Center Renewal Form

PLEASE PRINT CLEARLY

NAAPCC Certification # _____ Certification expiration date _____

Name _____

Full mailing address _____

City _____ State/Prov. _____ Zip _____ - _____

Home Phone # _____ W # _____ C # _____

Email address: _____ Facility/Company _____

Address _____ P.O. Box _____

City _____ State _____ Zip _____

Work email _____ Fax _____

- List CE Information below (**within the past 2 years**) Must be from one of the NAAP Credentialing Center Topic Areas. Attach *copies* of certificates with topic, presenter, presenter credentials, date, location, length, sponsor, authorized signature **Remember ½ of all credits must come from attendance and participation in a live workshop, conference, in-service.**
- 30 hours for AP-BC, 40 hours for AC-BC
- **Enclose renewal fee of \$60.**
- **Mail to NAAP Credentialing Center 224 N. Millbrook Court Aurora, CO 80018**
- **Allow 4 weeks for processing**

Event (Workshop, conference, in-service, etc.)	Date(s)	# CE Hours	Topic Area	Face-Face

*You may use another sheet if necessary or the reverse of this page.

Note:

Renewal *must be post marked by the expiration date* or a \$25 late fee will be added to the renewal fee. Past one year of the renewal date, you must recertify meeting all current standards.

Payment Options: ___ Check ___ Certified Check ___ Money order ___ Credit Card MC ___ Visa ___

Number _____ **Expiration Date** _____ **3 digit code (on back)** _____

Name on Card _____ **Company** _____ **Personal** _____

(If your check is returned or denied, an administrative fee of \$25 will be charged.)

Signature _____ **Date** _____