

Application for Non-KACE Training Credit

Date of Request: _____
 Jurisdiction: _____

Member Name: _____
 E-mail: _____
 Current Supervisor: _____

If you are applying for class credit, you must have completed the classes within the last 90 days and you **must attach attendance verification, class descriptions and instructor bios** for credit to be considered. Use additional sheets if necessary for more classes or certifications.

List of Training requested for credit (Applicant provides the following information)

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#	Date of Class	Class-room Hours	Class Title	Instructor	Organization Providing Training	Class Desc. Atch'd?	Instr. Bio Atch'd?	Cert. or other Verif. Atch'd?	Apprv'd
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

If you are requesting credit for a certification by another organization in the last 3 years, provide the following information and attach a copy of the certificate and list above the education/training that led to the certification.

List of Certifications requested for credit. (Applicant provides the following information)

#	Date of Cert.	Name of Certification	Certifying Organization Name	Cls Hr Req.?	Exp. Date?	Cert/ Desc/ Atch'd	Org. Inf. Atch'd	Apprv'd

I certify that the above information is true and correct:

 Printed Name

 Signature

 Date: