

# **Certified Professional in Catering and Events Recertification Application**

### **Recertification Requirements**

To qualify for recertification, CPCEs must achieve 30 contact hours from the past 5 years. Documentation must be included to receive points. Applications must be submitted by the recertification deadline. CPCEs that do not recertify by the deadline will be required to reapply and retake the CPCE exam.

## **Application Procedures**

Complete the application form in its entirety.

- ✓ Submit a typed application form. Handwritten applications will not be accepted.
- ✓ Make a copy of the completed application for your records.
- ✓ Email the completed application with documentation and payment to <a href="mailto:cpce@nace.net">cpce@nace.net</a>.

Applications that do not meet the minimum requirements below may be subject to a \$50.00 processing fee.

#### **Documentation Guidelines**

- Documentation must be submitted to receive contact hours for application approval.
- Documentation must include dates, educational hours, session descriptions, and proof of attendance.
- Education provider must be recognized by organization letterhead or similar representation.

# **Continuing Education** (1 hour of continuing education = 1 contact hour)

To be eligible for recertification, candidates must have a minimum of 30 contact hours. These hours are accumulated from education programs aligned with one or more of the CPCE core competencies. Participation must have occurred within the past 5 years. Types of accepted education include, but are not limited to:

- Company/organization sponsored continuing education or training
- Local professional development, including certificate programs and seminars
- NACE education programs including Experience, Evolve, chapter educational programs, webinars, Business
   Academies Certificate Program

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Allied association education programs (based on acceptance by NACE)



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Candidate Information		
Name		Date
Title		
Company		
Address		
City	State	_Zip Code
Work Telephone	Work Fax	
Work Email		
Home Address		
City	_State	_Zip Code
Home Telephone		
Home Email		
Please initial here to verify employment in the		he past 5 years

Continuing Education Education Provider and Seminar/Course Title	Date(s) Attended	Contact
		Hours
Example: NACE Experience! 2015 Conference	7/17/2015 –	12.5
	7/20/2015	
	I	
	TOTAL CONTACT HOURS	

2

3/28/2016