OFFICER CERTIFICATION RENEWAL

MISSOURI ANIMAL CONTROL ASSOCIATION

(Please print ALL information)

NAME _____
(Last) (First) (Middle)

HOME ADDRESS _____
(Street) (City) (State) (Zip)

HOME PHONE _____ **CELL PHONE** _____
(Area Code) (Number) (Area Code) (Number)

AGENCY NAME _____

AGENCY ADDRESS _____
(Street) (City) (State) (Zip)

AGENCY PHONE _____ **AGENCY FAX:** _____
(Area Code) (Number) (Area Code) (Number)

AGE _____ **DATE OF BIRTH** _____ **SEX male or female**

EMPLOYEED Full Time _____ **Part Time** _____ **Volunteer** _____

CERTIFICATION TERMS AND ACKNOWLEDGEMENT STATEMENT

I understand that my officer certification will be effective for 2 years from the date of renewal. I understand that I must obtain 20 hours of continuing education units (CEUs), and submit to the MACA certification committee, a copy of the training certificates or attendance awards, before the date of certification expiration, to be eligible to future renewal of my MACA certification. In addition to submitting the required continuing education units, I must also pay the certification renewal fee of $10.00, to MACA before the expiration date of my certification. I understand that, while MACA will attempt to keep me informed of my CEU credits and to notify me when it is time to renew my certification, it is my responsibility to keep track of my CEUs and certification expiration dates.

_____

Signature