



# Request for Recertification Credit

## Certified Connecticut Municipal Assessor's Committee

This form was developed for your convenience in reporting continuing education hours to the Certified Connecticut Municipal Assessor Committee. The CCMA Committee maintains specific recertification requirements and procedures for requesting credit. **Submission of this form does not imply automatic acceptance by the Committee.** Please note that if the program outlined below has not been previously approved by the CCMA Committee, more information may be required in order to approve this request, which may delay the processing of this request.

1. This form must be completed in its entirety. **PLEASE PRINT LEGIBLY.**
2. Please submit a copy to the Committee with your CCMA Recertification Application.
3. It is suggested that you keep a photocopy of each form submitted.

### Program Information

Attendee Name \_\_\_\_\_ CCMA Number \_\_\_\_\_

Program Title \_\_\_\_\_ Number of Instructional Hours \_\_\_\_\_

Program Date(s) \_\_\_\_\_ Program Location \_\_\_\_\_

Instructor/Presenter Name(s) \_\_\_\_\_

Program Description (For ease of submission, you may attach a brochure, program or other documentation) \_\_\_\_\_

Signature of Instructor/Presenter/Organizer \_\_\_\_\_

### Applicant Information

*I certify that I have completed the above-described professional activity. I am aware that any misrepresentations by me become subject to disciplinary action.*

Signature \_\_\_\_\_

Date \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Committee Use Only