|  |  |  |
| --- | --- | --- |
|  | CPLP ID: |  |
| C:\Users\pbyrd\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\S4RBZGFY\CPLP_v3 (3).png | **CPLP Recertification Application**  *and Tracking Sheet* | |

**Submission Instructions:**

1. Submit the completed application and Open-Book Assessment with payment. Incomplete recertification packets will not be considered.
2. Do not submit documentation unless requested.
3. Mail Completed Application to:

**ATD CI**

**c/o Virginia Sawall**

**1640 King Street**

**Alexandria, VA 22314**

**USA**

Please submit a completed application after you have fulfilled all recertification requirements. Incomplete applications will not be considered. Please type or print legibly. ATD CI will update personal information as given below.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PERSONAL INFORMATION** | | | | | | | | |
| Last Name: |  | First Name: | |  | | | | |
| Street Address: |  | | | | | *Check if this is a new address:* | |  |
| City/Province: |  | State: |  | | | Zip Code: |  | |
| Country: |  |  | | |  | | | |
| Primary Email: |  | Secondary Email: | | |  | | | |
| Primary Phone: |  | Secondary Phone: | | |  | | | |
| Employer Name: |  | Business Title: | | |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **RECERTIFICATION CYCLE**  (as it appears on your certificate) |  |  | To |  |
|  | MO/YR | MO/YR |

**RECERTIFICATION APPLICATION FEE: $200.00**

Fees are subject to change without notice and are nonrefundable. Please make checks, money orders or cashier checks payable to ATD CI in U.S. dollars. PLEASE DO NOT SEND CASH. To avoid multiple charges on your credit card, please do not send your application more than once.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Open-Book Assessment is enclosed |  | | | | |  | |  | |  |  | |  | |  | |
|  | Check is enclosed |  | | | | |  | |  | |  |  | |  | |  | |
| Charge my credit card: | |  | Visa |  | Master Card | | |  | | American Express | | |  | | Discover | | |
| Credit Card Number: | |  | | | | | | Exp. Date: | | | |  | | | CCV code: | |  |
| NAME: | | | | | | SIGNATURE: | | | | | | | | | | | |

|  |  |  |
| --- | --- | --- |
| **FOR INSTITUTE USE ONLY** |  |  |
| DATE RCVD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | AMT RCVD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | COMP. CK: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| PERSONAL CK:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | CREDIT CARD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | PROCESSED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | | | CPLP ID: |  |
| **CONTINUING EDUCATION** | **30 Point Maximum per three year cycle** | | |
| **Instructions** | | | |
| * List all TD related continuing education events attended during this recertification cycle. * One point is awarded for each physical hour of continuing education. * Points are accrued on an hourly basis for all educational time in TD-related continuing education events. * Educational activities must directly contribute to the CPLP’s understanding of the TD profession. * Recertification points are not awarded for time spent in non-educational time such as breaks, networking, registration, preparation and assignments.   For examples of eligible recertification continuing education activities, please refer to the Recertification overview document in <https://www.td.org/Certification/For-CPLPs/Recertification>. | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Documentation Requirement (In Case of Audit)** | | | | | | | |
| * Commercial or Industry-related courses/sessions - Letter or certificate of completion from the course sponsor verifying hours, dates and subject matter. * College Courses - Copy of official transcript or report card showing semester credit earned, course title, and completion date. * Chapter events or other Industry-related meetings - Proof of attendance such as name badge, attendance roster, sign-in sheet, certificate of completion, or travel voucher; and, Event/Meeting Description (program guide, outline, descriptions or schedule).   **Please photocopy pages as needed** | | | | | | | |
| **Title and Description of Program:** | | |  | | | | |
| Educational Institution or Host Organization: | | | |  | | | |
| Date of Activity | From: |  | | To: |  | Requested Points |  |
| **Title and Description of Program:** | | |  | | | | |
| Educational Institution or Host Organization: | | | |  | | | |
| Date of Activity | From: |  | | To: |  | Requested Points |  |
| **Title and Description of Program:** | | |  | | | | |
| Educational Institution or Host Organization: | | | |  | | | |
| Date of Activity | From: |  | | To: |  | Requested Points |  |
| **Title and Description of Program:** | | |  | | | | |
| Educational Institution or Host Organization: | | | |  | | | |
| Date of Activity | From: |  | | To: |  | Requested Points |  |
| **Title and Description of Program:** | | |  | | | | |
| Educational Institution or Host Organization: | | | |  | | | |
| Date of Activity | From: |  | | To: |  | Requested Points |  |
| **Title and Description of Program:** | | |  | | | | |
| Educational Institution or Host Organization: | | | |  | | | |
| Date of Activity | From: |  | | To: |  | Requested Points |  |
| **Title and Description of Program:** | | |  | | | | |
| Educational Institution or Host Organization: | | | |  | | | |
| Date of Activity | From: |  | | To: |  | Requested Points |  |
| **Title and Description of Program:** | | |  | | | | |
| Educational Institution or Host Organization: | | | |  | | | |
| Date of Activity | From: |  | | To: |  | Requested Points |  |
| **Continuing Education Total** | | | | | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | | | CPLP ID: |  |
| **SPEAKING AND INSTRUCTING** | **20 Point Maximum per three year cycle** | | |
| **Instructions** | | | |
| * CPLP recertification points are awarded per hour. * Points can be earned for development work (for every hour of delivery, the individual receives an hour of development time). Development hours cannot exceed delivery hours. * Points are awarded the first time the presentation is made and may not earn additional points for repeated presentations.   For examples of eligible recertification continuing education activities, please refer to the Recertification overview document in <https://www.td.org/Certification/For-CPLPs/Recertification>. | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Documentation Requirement (In Case of Audit)** | | | | | | | | | | | |
| * A letter from the organization, company or educational institution verifying the speaking topic/course title, dates, hours instructed and development hours (if applicable). Or * Course outline or description that documents the instructor’s name, course title and dates. * Commercial or Industry-related courses/sessions - Letter or certificate of completion from the course sponsor verifying hours, dates and subject matter. * College Courses - Copy of official transcript or report card showing semester credit earned, course title, and completion date. * Chapter events or other Industry-related meetings - Proof of attendance such as name badge, attendance roster, sign-in sheet, certificate of completion, or travel voucher; and Event/Meeting Description (program guide, outline, descriptions or schedule).   **Please photocopy pages as needed** | | | | | | | | | | | |
| **Title of Course or Name of Speaking Engagement:** | | |  | | | | | | | | |
| Date of Activity: | From: |  | | | To: |  | | |  | | |
| Facilitated For: |  | | | | | Location: |  | | | | |
| Number of Development Hours: | | | |  | | Number of Presentation Hours: | | | |  | |
|  | | | | | | | | Requested Points: | |  | |
| **Title of Course or Name of Speaking Engagement:** | | |  | | | | | | | | |
| Date of Activity: | From: |  | | | To: |  | | |  | | |
| Facilitated For: |  | | | | | Location: |  | | | | |
| Number of Development Hours: | | | |  | | Number of Presentation Hours: | | | |  | |
|  | | | | | | | | Requested Points: | |  | |
| **Title of Course or Name of Speaking Engagement:** | | |  | | | | | | | | |
| Date of Activity: | From: |  | | | To: |  | | |  | | |
| Facilitated For: |  | | | | | Location: |  | | | | |
| Number of Development Hours: | | | |  | | Number of Presentation Hours: | | | |  | |
|  | | | | | | | | Requested Points: | |  | |
| **Title of Course or Name of Speaking Engagement:** | | |  | | | | | | | | |
| Date of Activity: | From: |  | | | To: |  | | |  | | |
| Facilitated For: |  | | | | | Location: |  | | | | |
| Number of Development Hours: | | | |  | | Number of Presentation Hours: | | | |  | |
|  | | | | | | | | Requested Points: | |  | |
| **Speaking and Instructing Total** | | | | | | | | | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | | | CPLP ID: |  |
| **ON-THE-JOB EXPERIENCE** | **20 Point Maximum per three year cycle** | | |
| **Instructions** | | | |
| * CPLP recertification points are awarded per hour. * Points can be earned for a first time work experience if that activity adds or enhances the understanding of the TD body of knowledge (See pages 39-43 of the Certification Handbook). * Points can be earned for both development and delivery work.   For examples of eligible recertification on-the-job experience activities, please refer to the Recertification overview document in <https://www.td.org/Certification/For-CPLPs/Recertification>. | | | |

|  |
| --- |
| **Documentation Requirement (In Case of Audit)** |
| * A copy of finalized project and a letter from the organization, company or educational institution verifying the project and development and delivery hours.   **Please photocopy pages as needed** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description of New Work Experience**  **How did this add to your TD knowledge?** | **Dates From/To** | **Hours of Development** | **Hours of Delivery** | **Requested Points** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **On-the-Job Experience Total** |  |

|  |  |
| --- | --- |
| **RESEARCH AND PUBLISHING** | **20 Point Maximum per three year cycle** |
| **Instructions** | |
| * CPLP recertification points are awarded per published work. * Points can be earned by conducting research on a TD-related topic and by writing and publishing the results. * Articles published informally in newsletters, such as Learning Circuits or blogs, are not eligible.   For examples of eligible recertification research and publishing activities please refer to the Recertification overview document in <https://www.td.org/Certification/For-CPLPs/Recertification>. | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Documentation Requirement (In Case of Audit)** | | | | |
| * Magazine/Journal – Copy of the article and table of contents (to verify the specific issue, title of article and author/co-author). * Book/Chapter in Book – Copy of the title page showing title and author/co-author and a copy of the table of contents. * Dissertation of Master’s Thesis – Copy of dissertation   **Please photocopy pages as needed** | | | | |
| **Title of Published Article, Book, Chapter or Dissertation:** | |  | | |
| Name of Publication Which Article/Chapter Appeared: | |  | | |
| Date Published: |  | | Credit Hours Requested |  |
| **Title of Published Article, Book, Chapter or Dissertation:** | |  | | |
| Name of Publication Which Article/Chapter Appeared: | |  | | |
| Date Published: |  | | Credit Hours Requested |  |
| **Research and Publishing Total** | | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | | | CPLP ID: |  |
| **LEADERSHIP AND RECOGNITION** | **15 Point Maximum per three year cycle**  **\* 30 Points Maximum for CPLP Related Activities** | | |
| **Instructions** | | | |
| * CPLP recertification point values are specified. * Leadership points are awarded for volunteer activities for TD-related national associations. * Points are also earned for TD awards given to the individual (not to the institution or establishment). * Recertification points are not awarded for leadership activities that have no direct TD link.   For examples of eligible recertification leadership and recognition experience activities please refer to the Recertification overview document in <https://www.td.org/Certification/For-CPLPs/Recertification>. | | | |

|  |
| --- |
| **Documentation Requirement (In Case of Audit)** |
| * Leadership - Letter from the sponsoring organization verifying participation in volunteer activity, documents providing information about the activity such as a description of the activity, identification of role/position and time appointed/served. * Awards - Award certificate or letter of recognition from the sponsoring organization.   **Please photocopy pages as needed** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Leadership Organization** | **Location** | | **Position** | | **Dates From/To** | | **Requested Points** |
|  |  | |  | |  | |  |
|  |  | |  | |  | |  |
|  |  | |  | |  | |  |
|  |  | |  | |  | |  |
| **TD Award** | | **Purpose of Award** | | **Date Awarded** | | **Requested Points** | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |

|  |  |
| --- | --- |
| **Leadership and Recognition Total** |  |

|  |  |
| --- | --- |
| **PROFESSIONAL MEMBERSHIP** | **15 Point Maximum per three year cycle** |
| **Instructions** | |
| * CPLP recertification points are **not** assigned per hour. Rather, point values are specified. * Recertification points are available to CPLPs who are active members of a national, international or local chapter TD-related professional association or society. * Points are awarded per year for this category. * Points requested must be for unique and mutually exclusive experiences.   For examples of eligible recertification professional membership experience activities please refer to the Recertification overview document in <https://www.td.org/Certification/For-CPLPs/Recertification>. | |

|  |
| --- |
| **Documentation Requirement (In Case of Audit)** |
| * Proof of current membership.   **Please photocopy pages as needed** |

|  |  |  |
| --- | --- | --- |
| **Name of Organization** | **List Years in Recertification Cycle You Were a Member in Good Standing** | **Requested Points** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| **Professional Membership Total** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | | CPLP ID: | |  |
| **Recertification Points Summary Sheet** | | | |
|  | | **Category Points** | |
| **Continuing Education**  30 Maximum Points | |  | |
| **Speaking and Instructing**  20 Maximum Points | |  | |
| **On-the-Job Experience**  20 Maximum Points | |  | |
| **Research and Publishing**  20 Maximum Points | |  | |
| **Leadership and Recognition**  15 Maximum Points (30 Maximum for CPLP Related Activities) | |  | |
| **Professional Membership**  15 Maximum Points | |  | |

|  |  |
| --- | --- |
| **Grand Total** |  |
| **Please sign this line indicating that your completed Open-Book Assessment on the Global Mindset is attached. Signature:** |  |

By submitting and signing this Recertification Application Form for a three year renewal cycle, I verify to the best of my knowledge that the information contained herein is true, complete and accurate, and that the continuing education activities undertaken were in talent development. I understand that all credits are subject to verification by ATD CI through the audit process.

|  |  |  |
| --- | --- | --- |
| Signature |  | Date |