



# CONTINUING EDUCATION PETITION APPLICATION

Please complete this form to request approval for continuing education courses that are not pre-approved by AFAA.

### WHAT NAME IS ON YOUR EXISTING CERTIFICATE(S)?

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

PHONE ( \_\_\_\_\_ ) \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_

Street

City

State/Zip

### WHAT COURSE DID YOU COMPLETE?

Course/CEU Activity Title: \_\_\_\_\_

Type of Activity:  Workshop  Seminar  Self study  Conference  Other

Date(s) \_\_\_\_\_ Contact Hours (excluding scheduled breaks) \_\_\_\_\_

Course/CEU Provider \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_ Web Site \_\_\_\_\_

### HOW DID THIS COURSE PROVIDE KNOWLEDGE, SKILL AND ABILITY ABOVE ENTRY LEVEL?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### PLEASE PROVIDE THE FOLLOWING DOCUMENTATION:

- Certificate of Completion
- Course outline or agenda
- Instructor resume or bio

### PETITION FEE: \$25 for EACH course submitted

Make your petition payment on-line at [www.afaa.com](http://www.afaa.com) or by phone at **800-446-2322**

### EMAIL \* OR MAIL THIS APPLICATION AND ALL SUPPORTING DOCUMENTS TO:

EMAIL: [recerts@ascendlearning.com](mailto:recerts@ascendlearning.com)

\*Application and supporting documentation must be submitted in **one** PDF file.

MAIL: AFAA RECERTIFICATION DEPARTMENT  
355 E GERMANN RD., SUITE 201  
GILBERT, AZ 85297