



CPD LOG FOR RECERTIFICATION ACTIVITIES DURING A THREE-YEAR PERIOD

Full Name: _____

NICET ID or Certification Number: _____

Expiration Date (month/year): ____/____

CPD points must be accumulated during the three years previous to your expiration date.

Field/Subfield Name (from section 2 of Recertification Invoice): _____

Keep a separate log for each certification you wish to recertify. This will help minimize over and under counting CPD points.

Carefully read Policy #30, "Continuing Professional Development" and its Exhibit I before beginning to fill out your log.

INSTRUCTIONS

NICET encourages and requires professional development through recertification. NICET-certified engineering technicians and technologists, at the end of a three year period are required to demonstrate professional growth via 90 continuing professional development (CPD) points. Using a pre-established point scale, candidates may earn points serving as an active practitioner, additional education, certification activity, participation in advancing your profession, or a special exam.

Your CPD log is required with submission of your Recertification Invoice and payment.

SECTION A: ACTIVE PRACTITIONER

Most of your accumulated points will come from Section A, "Active Practitioner".

- Complete in chronological order, accounting all relevant engineering technician or related work experience **within your three-year recertification period.** You are encouraged to use a separate page for each (different) employer. Photocopy extra copies of Section A, as needed.
- Any job title or responsibility change occurring with the same employer should be listed separately on the same page. **Include only details of activities pertinent to the certification you wish to recertify.**
- Count conservatively the hours associated with each certification area. This will help you in determining if other activities are necessary for recertification.
- Persons with multiple certifications that are minimally related need only average 2 hours per day to meet the minimum of 500 hours per year to earn 12 points per year as an active practitioner.

SECTION B: ADDITIONAL EDUCATION

- List all relevant college courses, workshops, seminars, and technical presentations at meetings and training sessions—by type—you attended **WITHIN YOUR THREE-YEAR RECERTIFICATION PERIOD.** You may also count company monthly training sessions if the training is new material.
- Retain course announcements, certificates of accomplishment, etc. as evidence of participation.

SECTION C: ADVANCED PROFESSION

- List all relevant activities—by type—you participated in **WITHIN YOUR THREE-YEAR RECERTIFICATION PERIOD.**
- Retain invitations to participate, letters of appreciation, etc. as evidence of participation.

SECTION D: CERTIFICATION ACTIVITY

- List all relevant NICET testing/certification as well as all relevant Non-NICET certification activity you participated in **WITHIN YOUR THREE-YEAR RECERTIFICATION PERIOD.**
- Testing/certification activities with incomplete results may be listed – but CPD points cannot be assigned until results are finalized and/or higher levels of certifications awarded.

SECTION E: SPECIAL EXAM

- A Special Exam is not necessary for recertification unless you wish to maintain a certification area in which you are no longer an active practitioner or you need additional CPD points for recertification.



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ADDITIONAL INFORMATION:

- Avoid dual counting of hours/activities whenever possible – particularly when you are recertifying in more than one certification area.
- We use the same criteria for counting work activities as pertinent to a particular field/subfield as we do for initial or upgraded certification.
- NICET will perform a random audit on a percentage of certificants who submit recertification documents prior to the expiration date. If your application undergoes an audit, you are required to submit documentation for the points you claimed. NOTE: Individuals with multiple certifications have a higher probability of undergoing an audit than those with a single certification. You should keep this log, a copy of Policy #30, and all supporting documentation in a single, convenient, and secure location.
- **You must sign and date your log.**
- You may submit this log electronically to irecert@nicet.org. For the purpose of electronic processing, an electronic signature constitutes the same as a handwritten signature. By submitting this form electronically, you are agreeing that you have read and understood all instructions and accept conditions set forth within.



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SECTION A. ACTIVE PRACTITIONER (Exhibit I, Paragraph II.A.)

NOTE: It is recommended that you list only one employer per page. You may make additional copies of this form as needed.

Dates of Employment (during CPD period)		List in the column below: a) Name & address of employer; b) Your title(s); c) Name & title of your immediate supervisor; d) Description of your duties and job responsibilities; and e) CPD points for each position you have held.	CPD Points
From (Mo/Yr)	To (Mo/Yr)		
		Total Active Practitioner Points	



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SECTION B. ADDITIONAL EDUCATION (Exhibit I, Paragraph II.B.)

COLLEGE CREDIT COURSES RELATED TO CERTIFICATION AREA

Name of School	Course Title/Description	Date(s) Attended		No. of Hrs Earned _____/_____ Semester Quarter	CPD Points
		From	To		

OFFERINGS WITH PREASSIGNED CEU's RELATED TO CERTIFICATION AREA
(if issued a certificate of completion and the CEU's are listed on that document, then calculate your points here)

Name of Sponsor	Course Title and Description	Date(s) Attended		Number CEUs	CPD Points
		From	To		

OTHER OFFERINGS (FORMAL/INFORMAL) RELATED TO CERTIFICATION AREA
(if no CEU's were assigned, list your training here, one point for every hour of training)

Name of Sponsor	Title and Description	Date(s) Attended		Number of Contact Hours	CPD Points
		From	To		



Full Name: _____

NICET ID or Certification Number: _____

SECTION C. ADVANCED PROFESSION (Exhibit I, Paragraph II.C.)

ACTIVE COMMITTEE/TASK FORCE SERVICE RELATED TO CERTIFICATION AREA

Name of Organization	Name of Committee/ Task Force	Type of Committee/ Task Force (National, Regional, State, Local)	Title Position	Dates of Service		CPD Points
				From	To	

PRESENTATIONS RELATED TO CERTIFICATION AREA

Name of Sponsor	Type of Presentation	Title/Description	Role	Date(s)	CPD Points

COURSE INSTRUCTION RELATED TO CERTIFICATION AREA

Name of Sponsor	Course Title/Description	Contact Hrs./Semester Hrs./Quarter Hrs.	Dates		CPD Points
			From	To	

CAREER DAY PRESENTER RELATED TO CERTIFICATION AREA

Name of Sponsor	Event Title	Location	Student Level	Date	CPD Points

PROFESSIONAL SOCIETY ACTIVITY RELATED TO CERTIFICATION AREA

Name of Organization	Type of Participation	Date(s) of Service/Attendance	CPD Points



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SECTION D. CERTIFICATION ACTIVITY (Exhibit I, Paragraph II.D.)

NICET CERTIFICATION ACTIVITY (I.E. UPGRADE, INITIAL CERTIFICATION RELATED AREA)

Work Element Format (Enter Passed Elements/Exam Req. Met OR Awarded)				CPD Points	Standard Model Format (Select only one.)			
Date	Passed Elements	Exam Req. Met	Awarded		Date	Exam Req. Met	Awarded	CPD Points

NON-NICET CERTIFICATION ACTIVITY IN A RELATED PRACTICE AREA

Name of Provider	Certification Title/Level	Date Awarded	CPD Points

SECTION E. SPECIAL EXAM

CPD points may be claimed only if a passing score is achieved on the special exam.

Date of Exam: _____	CPD Points: _____
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SIGN AND DATE (REQUIRED)

I certify that the information submitted in this application package is correct, factual and complete. I understand that any misrepresentation of information can result in the rejection of this application and the revocation of any/all NICET certifications issued in my name. I further certify that I have read and I understand the NICET Continuing Professional Development policy; I accept the conditions set forth; and I have accurately stated my wishes and all CPD points in accordance with NICET's Policy #30 (Continuing Professional Development). I understand that the payment is nonrefundable and that I may be asked to submit documentation supporting my CPD points as a requirement for recertification.

By submitting this form electronically, you are agreeing that you have read and understood all instructions and accept conditions set forth within. Individuals who are mailing the form must sign and date below. For the purpose of electronic processing, an electronic signature constitutes the same as a handwritten signature.

Signature: _____

Date: _____