

SOFTWARE CERTIFICATIONS RECERTIFICATION JOURNAL
Recertification Summary
INSTRUCTIONS

General Instructions

- A. **Forms must be mailed.** Faxes and electronic submissions are *not* accepted. Certified Mail is strongly recommended.
To: Software Certifications, 7575 Dr. Phillips Blvd., Suite 350, Orlando, FL 32819-7273 USA
- B. **Payment required.** Recertification packages will not be processed without full payment. Software Certifications does not issue invoices for recertification fees. Receipts will be issued when updated credentials are issued.
- C. **Receipt of package is NOT acknowledged.** Do NOT contact Software Certifications to confirm receipt of your Recertification Journal. If receipt confirmation is desired, use a shipping or postal service that offers package tracking and/or signature receipts.
- D. **Materials are NOT returned.** Forms and attachments in the Recertification Journal are NOT returned to the candidate, even if the submission is rejected. Candidates should keep copies of all materials and forms submitted in case resubmission for correction or replacement is required.
- E. **Omit instruction pages.** Recertification submissions should *not* include any instruction pages.

Your Recertification Journal to be submitted will consist of many forms and pieces of supporting documentation. This Recertification Summary serves as cover and control sheet for that package. It summarizes both the number of items/sheets that are attached, as well as the CPE credit hours being reported on those forms. Recertification requires a minimum of 120 hours total, although no particular number of CPE credits is required in any given year. Behind this form you will attach the necessary detail reporting forms and all supporting documentation. It is important that you keep copies of all submitted materials. Software Certifications is not responsible for lost or misdirected materials.

Application Items

- 1. **Certificant Name.** Provide the full name of the certificant as it currently appears in Software Certification records.
- 2. **Certification.** Circle the appropriate certification for which this form is being submitted, and provide your specific certification number.
- 3. **Expiration Date.** Provide your certification expiration date.
- 4. **Current Job Title/Description.** Provide your current job title or description so that your recertification assessment can take into account your current basic job responsibilities when evaluating credit appropriateness and applicability.
- 5. **Other Job Titles/Descriptions During Recertification Period.** List other job positions held during the time period reported in this recertification package if different from the one listed in #4.
- 6. **Reporting Categories.** Summarize the CPE credits claimed, by reporting category and reporting year. Reporting years run from anniversary date to anniversary date each year, *not* calendar years. Your expiration date is the end of the third Reporting Year. Other reporting year dates can be calculated backward from that date. Space has been provided on the form to record the start and end dates of each reporting year. Begin by placing your expiration date in the last (right-most) position, and calculating first-year and second-year dates backward from that point. You should report the number of activities being claimed in each category each year. There will be one attached Recertification Activity Reporting Form for each activity. Also report the total number of CPE credit hours claimed for those items. Finally, calculate totals for those columns, and produce the final totals. Total credit can exceed 120 hours.
- 7. **Payment Information.** Provide payment information for the **\$100US** recertification fee, using either a check payable to **Quality Assurance Institute** or **QAI**, or credit card. For security validation: If using VISA, provide the Vcode from the back of the card. The Vcode is the last three digits of the number printed on the signature strip on the back of the card. Recertification fees are nonrefundable and nontransferable.
- 8. **Certificant Signature & Date.** This summary form must be signed. Please read the text above the signature block carefully before signing. Typed or printed names are not acceptable.

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1. Certificant Name <i>{Last, First, MI}</i>							
2. Certification: CSQA CSTE # _____ <i>{Circle one designation and provide certificate number}</i>						3. Expiration Date	
Recertification credentials are mailed to the your current address of record. Make sure to submit a <i>Change of Records Form</i> if any contact information has changed since your last submission. You are responsible for assuring that Software Certifications has the correct mailing address.							
4. Current Job Title/Description:							
5. Other Job Titles/Descriptions During Recertification Period:							
6. REPORTING CATEGORIES	CATEGORY LIMITATION	REPORTING YEAR 1		REPORTING YEAR 2		REPORTING YEAR 3	
		Dates: / /		Dates: / /		Dates: / /	
		ACTIVITIES	CREDITS	ACTIVITIES	CREDITS	ACTIVITIES	CREDITS
A. Courses	No category limit. Limits per item.						
B. Publications	No category limit. Limits per item.						
C. Teaching	No category limit. Limits per item.						
D. Professional Participation	20 credits per year. Limits per item.						
E. Self-Study	10 credits per year. Limits per item.						
F. Unique & Innovative Job Tasks	20 credits per year. Limits per item.						
Reporting Year Totals							
3-Year Grand Total							
7. Payment Information							
<i>The recertification processing fee is</i> \$100 US	<input type="checkbox"/> A. Check or money order in US funds enclosed payable to QAI.					A receipt will mailed with the reissued credentials.	
	<input type="checkbox"/> B. Credit Card: MASTERCARD VISA AMEX <i>{circle one, provide details}</i>						
	Card Number					Vcode <i>{Visa Only}</i>	
	Expiration Date						
Cardholder's Name							
By signing below I attest that all of the information reported above is accurate and that all of the required supporting forms and documentation has been included in this package. I understand that missing or incomplete information in this packet will result in the rejection of the entire package by Software Certifications. I also understand that it is my responsibility to submit this package, and resolve any errors or omissions, before my certification expiration date, and that failure to do so can result in loss of my certification.							
8. Certificant Signature						Date	

Incomplete or illegible forms will be returned to the certificant for correction.