

# RECERTIFICATION MAINTENANCE REQUIREMENTS

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

The following recertification **points are required** within 5 years of the date you earned your designation:

DESIGNATION (circle one):

CHRM, CHSP	40
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- \_\_\_\_\_ 8 points per year Full-time employment in your certification designation qualifying position.  
*Provide your resume, and a statement of employment verification from personnel or human resources official.*
- \_\_\_\_\_ 5 points per course Successful completion of graduate/undergraduate course from an accredited Institution.  
*Provide a copy of transcript or grade report indicating you passed.*
- \_\_\_\_\_ 5 points per course Successful completion of an AHLEI Distance Learning course.  
*Provide a copy of transcript or grade report indicating you passed.*
- \_\_\_\_\_ 3 points per seminar Completion of any industry related workshop/seminar.  
*Provide a statement of verification.*
- \_\_\_\_\_ 5 points per designation A professional certification designation from an affiliated association.  
*Provide an Activity Verification Form.*
- \_\_\_\_\_ 5 points per year in office Association board member or officer.  
*Provide an Activity Verification Form by association executive or board chairman/president*
- \_\_\_\_\_ 4 points per year in office Association committee member.  
*Provide an Activity Verification Form by association executive or board chairman/president.*
- \_\_\_\_\_ 1 point per year/membership Active member of an industry-related professional association.  
*Provide an Activity Verification Form by association executive or board chairman/president.*
- \_\_\_\_\_ 2 points per year Board member, officer, or committee member for an allied and/or industry-related organization.  
*Provide an Activity Verification Form by organizational official.*
- \_\_\_\_\_ 1 point per day attending Attendance at a national, state, or affiliated professional association trade show, conference, or convention.  
*Provide an Activity Verification Form specifying sponsor, date of activity, and location.*
- \_\_\_\_\_ 4 points per presentation Presentation/Panelist/Guest Speaker for a national, state, or affiliated professional hospitality industry-related event.  
*Provide an Activity Verification Form specifying sponsor, topic, title, and time length of presentation.*

\_\_\_\_\_ **TOTAL RECERTIFICATION MAINTENANCE POINTS**