

CONTACT INFORMATION

Name _____ Position _____

Company _____

Street Address _____

City, State, Zip Code _____

Phone _____ Email _____

All CLMCs and CSLCs must renew their certification every three (3) years. All certification cycles begin on January 1 and end on December 31. The renewal cycle begins January 1 of the year immediately following successful completion of the CLMC or CSLC examination. To renew a certification you must earn a total of 40 hours of professional development during the past three (3) years. You may include up to 10 hours of leadership activities, authorship or training/teaching. You will receive one hour of credit for actual clock time. Partial hours qualify. CLMC or CSLCs wishing to renew their certification by retaking

the examination in the third year of their designation cycle are not required to remit the renewal fee. Continuing education hours may be acquired from the date of successful completion of the CLMC or CSLC examination. All hours for a three (3) year cycle may be earned in any one year or combination of years during the certification cycle.

Use the enclosed pages to document your continuing education hours. Submit all pages along with this completed form and payment to renew your designation.

PAYMENT METHOD/AUTHORIZATION

	RENEWAL FEES & PAYMENT OPTIONS: Check, Visa, MasterCard, American Express
<input type="checkbox"/> CLMC Recertification Fee	\$300 (\$550 After February 1)
<input type="checkbox"/> CSLC Recertification Fee	\$450 (\$700 After February 1)
<input type="checkbox"/> CLMC Stamp	\$60 Per Stamp (includes shipping)
<input type="checkbox"/> CSLC Stamp	\$60 Per Stamp (includes shipping)

Total Due _____

Credit Card Number _____

Cardholder Name _____

Expiration Date _____

By submitting and signing this Certification Renewal Form, I verify to the best of my knowledge that the information contained herein is accurate and that the education and participation activities were in lighting related fields.

Name *(Please Print)* _____

Signature _____

Date _____

RETURN REPORT AND PAYMENT TO:

1255 SW Prairie Trail Pkwy
Ankeny, IA 50023
Phone: 515-243-2360 • Fax: 515-334-1174
Email: memberservice@nalmco.org

