Clean Communities Coordinator Recertification Form

To retain their certification, individuals must acquire twenty (20) hours of continuing education and/or training during the two years (approximately) following their initial certification and for each two-year period thereafter. This form is for reporting recertification efforts during the period ending December 31, 2028.

Recertification hours will be made available for **all** NJCCC events. Information on the number of hours associated with a program or event will be included on all announcements for those programs.

Name: _____

Phone and E-mail: _____

Employer: _____

Mailing Address: _____

_____

Date of Initial Certification Training _____

The following summarizes my recertification efforts during the period ending 12.31.28.

Signature: _____ Date: _____

Completed form and any required backup documentation should be e-mailed to Pamela Mayer (pam.mayer@rutgers.edu) at the Rutgers/ NJAES Office of Continuing Professional Education no later than one month after recertification period ends.

Clean Communities Coordinator Recertification Tracking Form
For the Period Ending 12/31/28

Event Title: _____

Event Date: _____

Event Sponsor (if not NJCCC): _____

Number of Credit Hours Assigned to the Event: _____

Event Title: _____

Event Date: _____

Event Sponsor (if not NJCCC): _____

Number of Credit Hours Assigned to the Event: _____

Event Title: _____

Event Date: _____

Event Sponsor (if not NJCCC): _____

Number of Credit Hours Assigned to the Event: _____

Event Title: _____

Event Date: _____

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Event Title: _____

Event Date: _____

Event Sponsor (if not NJCCC): _____

Number of Credit Hours Assigned to the Event: _____

Clean Communities Coordinator Recertification Tracking Form
For the Period Ending 12/31/28

Event Title: _____

Event Date: _____

Event Sponsor (if not NJCCC): _____

Number of Credit Hours Assigned to the Event: _____

Event Title: _____

Event Date: _____

Event Sponsor (if not NJCCC): _____

Number of Credit Hours Assigned to the Event: _____

Event Title: _____

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Event Date: _____

Event Sponsor (if not NJCCC): _____

Number of Credit Hours Assigned to the Event: _____

Clean Communities Coordinator Recertification Tracking Form
For the Period Ending 12/31/28

Event Title: _____

Event Date: _____

Event Sponsor (if not NJCCC): _____

Number of Credit Hours Assigned to the Event: _____

Event Title: _____

Event Date: _____

Event Sponsor (if not NJCCC): _____

Number of Credit Hours Assigned to the Event: _____

Event Title: _____

Event Date: _____

Event Sponsor (if not NJCCC): _____

Number of Credit Hours Assigned to the Event: _____

Total Number of Recertification Credits for the Period:

_____