

## **Technician Recertification Application Using Continuing Education Hours**

Choose One ∢

Return to: 2111 Wilson Blvd. Suite 510
Arlington, VA 22201
Fax to: 703-527-2316
Email to: recertify@natex.org

This form must be completed in order to recertify using your continuing education hours accumulated during the two years of your certification. This form does not need to be completed if you are recertifying by testing.

Please provide the following contact information. All fields labeled with an asterisk (\*) are required. Your home mailing address will be the address where NATE sends your recertification documents unless you note otherwise.

Technician Information:	
First Name*:	_ Last Name*:
Mailing Address*:	
City*:	State*: Zip*:
Home Phone: ()	Mobile Phone: ()
Email Address*:	
NATE ID Number*:	
Check the boxes of the specialties you are recert	ifying:
Air Conditioning	Hydronics Gas
Air Distribution	Hydronics Oil
Air to Air Heat Pump	Light Commercial Refrigeration
Gas Heating (Air)	Commercial Refrigeration
Oil Heating (Air)	Senior Level Efficiency Analyst
Employer Information:	
Company Name:	
Company Address:	
City:	State: Zip:
Company Phone: ()	Fax: ()
Company Email Address:	

Additional Recertification Documentar	t <b>ion</b> : If you h	nave not yet completed the co	ontinuing education ho	ours requirement, a	ttach copies of your
attendance records for additional continuing education hours. Credit cannot be awarded without attached proof. You do not need to include					
documentation for any courses NATE has already recorded. Recorded courses are displayed on www.myNATE.org.					
Provider Name	Cla	ss Title		Class Date	CEH Hours
Payment Information's leg	g'int wevw	tg'hqecvgf 'qp'r ci g':	5):		
Payment Method:					
Check enclosed	Visa	Master Card	American 1	Express	Discover
<b>Credit Card Information</b> :					
Name on Card:	Signature of Card Holder:				
Card Number			Expiration Date:	/(	CV2:
<b>Check Information:</b>					
Name on Check:	Check Number:				
I have had tracked by NATE or	attached p	proof of verifiable contin	nuing education w	ith a minimum	of 16 hours of
continuing education over the tv	wo years o	f my certification.			
I expressly state that everything	stated her	ein is true and accurate.	Falsification of c	ertification or o	continuing
education documents provides grounds for the revocation of certification.					
Signature:				Date:	

## **Recertification Fees**

These recertification fees only apply to recertification using Continuing Education Hours. If recertifying by testing, the fee is determined by the Testing Organization.

Individual	Recertification
Air Condit	ioning

Air Conditioning	\$25.00
Air Distribution	\$25.00
Gas Furnace	\$25.00
Heat Pump/Air Conditioning	\$25.00
Oil Furnace	\$25.00
Hydronics Gas	\$25.00
Hydronics Oil	\$25.00
Light Commercial Refrigeration	\$25.00
Commercial Refrigeration	\$25.00
Efficiency Analysts	\$25.00

Multiple Recertifications done at the same time for an individual technician (\$5 for each additional certification)

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Two Recertifications	\$30.00
Three Recertifications	\$35.00
Four Recertifications	\$40.00
Five or More Recertifications	\$5.00 each

Please note: Heat Pump recertification includes Air Conditioning

recertification at no cost.

Service recertification includes Installation recertification at no cost.

Note: When renewing multiple certifications, all the certification dates will be changed to match the date of the most immediate expiring certification. For example, if you renewed an AC Service certification expiring September 2014 and a Gas Furnace Certification expiring December 2014 together, both would have their new certification dates changed to September 2014 with both having an expiration date of September 2016.