

NAHB Professional Designation Emeritus Status Application

Please complete the information below:	
Name:	Phone:
Company:	Fax:
Address:	Email:
City, State, Zip:	Education ID:
Designations: ☐ CAPS ☐ CGA ☐ CGE	B
☐ Master CGP ☐ Master	r CSP 🗖 MIRM
complete the continuing education require	continue using their professional designation without having to ement or submit payment of the annual renewal fee. Emeritus s. Interested designees must submit an emeritus application for emmittee.
You are required to submit the following	ng documentation with this application:
A statement of retirement.	rs of age. (e.g., Drivers License, Birth Certificate, or Passport) tanding for at least 10 years. Graduation Year
Acknowledgment:	
I, the undersigned, hereby certify that the best of my knowledge.	information provided in this application is true and accurate to the
Applicant's Signature:	Date:

PLEASE RETURN TO:

NAHB Education
Attn: Candidate Services
1201 15th Street, NW
Washington, DC 20005
Or fax to (202) 266-8191

Email: Learning@nahb.org