

AACS CEU Accreditation Team Member Voucher

Directions:

- Print legibly.
- This form is required to verify participation as a member of an AACS (or AACS-affiliate) school accreditation team.
- Team chair's signature is required.
- Retain this form. When you submit certification renewal application, include this form with your other renewal paperwork.
- For certificate renewal, no more than 3.0 CEUs may be for serving on school accreditation teams.
- Service on a team is valued at 1.0 CEU.

Team Member Information

Name _____ Phone _____

Address _____ E-Mail _____

City _____ State _____ Zip _____

Certification Area:

- | | | |
|---------------------------------------|---|--|
| <input type="checkbox"/> Preschool | <input type="checkbox"/> Secondary | <input type="checkbox"/> Specialist (Bible, Computer/Info. Technology, Counseling) |
| <input type="checkbox"/> Kindergarten | <input type="checkbox"/> All-Level (Music, Art, PE) | <input type="checkbox"/> Administrator |
| <input type="checkbox"/> Elementary | <input type="checkbox"/> Special Education | |

Current Certificate Endorsement (Elem. Ed, Music, Bible, Math, Science, English, etc.) _____

Information for School Visited by Accreditation Team

Name of School Visited by the Accreditation Team _____

City and State of School _____

Dates of Accreditation Visit _____

Accrediting Agency (AACS or State Affiliate) _____

Team Chair Information

Name of Accreditation Team Chair (print) _____

Accreditation Team Chair's Signature* _____ Date _____

*Team Chair's Signature verifies the accreditation team member's participation.

For Office Use Only

- | | |
|---|------------------------|
| <input type="checkbox"/> CEU credit granted | |
| <input type="checkbox"/> CEU credit denied | Explanation of denial: |

Number of CEU credits allowed for activity: _____ CEU

Signature of Education Office official _____ Date of Reply _____