

Application for Graduation - CERA/CERV Program

Procedure

1. Look at your records to verify that you have completed the required PEP courses I through XII.
2. Mail forms and fees to: Connie Schmidt, CERA, P.O. Box 478, Spring Hill, KS 66083 (Call Houston office for overnight delivery address.) Phone: (913) 206-7395
3. Deadline for submission is June 1.

Application for Graduation - CERA/CERV Program

NAME: _____
(As to appear on graduation materials)

TITLE: _____

**JURISDICTION OFFICE/
FIELD OF
EMPLOYMENT:** _____

BUSINESS ADDRESS: _____

**PHONE, FAX,
E-MAIL:** () _____ **FAX:** () _____

E-MAIL: _____

ENCLOSED ARE:

- _____ Check for \$175 if attending conference and graduation ceremony, OR
- _____ Check for \$275 if not attending conference and graduation ceremony or if attending graduation ceremony only
- _____ Application for Graduation
- _____ Experience Category Credit information
- _____ Experience Verification Credit information
- _____ Conference/Workshop Credit information
- _____ Documentation
- _____ Miscellaneous: _____

CHECK: **PEP courses you plan to complete between June 1 and July 31 of this year:**

 ___ I ___ II ___ III ___ IV ___ V ___ VI ___ VII ___ VIII ___ IX ___ X

 ___ XI ___ XII

CHECK: **I am requesting approval for graduation as:**

 ___ CERA (OR) ___ CERV (OR) ___ CEM

APPLICANT'S SIGNATURE: _____ **DATE:** _____

APPLICANT'S NAME _____

Experience Category Credit for Graduation

Procedure

1. Check the Experience Category that applies, i.e., Category 1 OR Category 2.
2. Note: Qualifying experience must occur immediately preceding entrance into PEP program or during time in the program, and be met by the deadline for submitting the Application for Graduation.

_____ **CATEGORY 1**

_____ I have administered, been involved in the conduct of, or maintained voter records for, at least one jurisdiction-wide election.

This means statewide unless you do not have such authority. An example is a city clerk who does not administer statewide elections but does administer jurisdiction-wide - i.e., for the entire city.

AND

_____ I am a full-time election or registration administrator/official, OR

_____ I am employed full-time in a job where election administration or registration of voters is a portion of my full-time job.

AND

_____ I have completed 2 years of election or voter registration experience (by graduation date).

OR

_____ **CATEGORY 2**

_____ I do not meet the requirements of Category 1 above.

This might include those with authority for jurisdiction-wide elections, i.e., local election boards who do not actually conduct elections but oversee staff with election responsibilities, or vendor representatives. However, I am submitting certification/verification of experience that qualifies me for CERA/CERV approval.

AND

_____ I have completed 2 years of election or voter registration experience (by graduation date).

APPLICANT'S SIGNATURE: _____ **DATE:** _____

APPLICANT'S NAME _____

Experience Verification Credit for Graduation

Procedure

1. Complete one page for each position you have held that qualifies you for CERA/CERV approval. Duplicate as many forms as necessary. Please print.

Experience Verification Credit for Graduation

EMPLOYED BY: _____
(Name of Organization/Jurisdiction)

(Address)

(City, State, Zip)

Date: _____

(From /To)

Brief Description of election/registration duties/experience:

Statewide or jurisdiction-wide elections you have administered or been involved in the conduct of, or maintained voter records for, during the dates of employment listed above:

| Election Title | Date | Election Title | Date |
|----------------|------|----------------|------|
|----------------|------|----------------|------|

APPLICANT'S SIGNATURE: _____ **DATE:** _____

The following is to be completed by person certifying/verifying the above information. This cannot be the applicant.

Note: If you are an elected official, the verification should be a person in a position to verify that you were in that position during the dates stated, i.e., County Administrative Officer, State Director of Elections, Secretary of State, etc.

Certified by: _____
(Signature)

Date: _____

Print Name: _____

Phone: () _____

Title: _____

Fax: () _____

Address: _____
(Street)

(City) (State) (Zip)

APPLICANT'S NAME _____

Conference/Workshop Credit for Graduation

Procedure

1. Conference/Workshop Requirements (2 events):
 - (1) Attend 2 Election Center conferences or workshops; OR
 - (2) Attend 1 Election Center conference or workshop **PLUS** attend 1 event from another association (minimum of 5 hours of election or voter registration subject matter).
2. Attendance must occur between the admission date and graduation date. **NOTE:** PEP courses do not count for conference/workshop credit - you must have attended the actual conference/workshop to receive credit.

Conference/Workshop Credit for Graduation

| Organization | Title of Event | Location | Date | Documentation • No documentation required for Election Center events • Other events - documents required: program or written description PLUS receipt or cancelled check |
|--------------|----------------|----------|------|--|
| | | | | |
| | | | | |
| | | | | |

APPLICANT'S SIGNATURE: _____ **DATE:** _____