

## **CPCA 5-Year Certified Application**

Name of Institution:	Date:	
Address:		
(Street Address)	(City, State)	(Zip)
Phone #:	Fax #:	
Website:		
President/CEO:	Email:	
Certification Coordinator:	Email:	
Date the institution's governing board's de Requirements:	ecided to proceed with the CPCA 5	-Year Certified
Current enrollment: Num	nber of new enrollments this school y	ear:
The CPCA 5-Year Certified Application is process and as such needs to be sent to		nis Certification
CPCA 5-Year Certified Fee <u>UNTIL</u> Decembe CPCA 5-Year Certified Fee <u>AFTER</u> January (Fee must be paid in full before CPCA 5-Yea	1, 2019 \$2,750.00 enclosed	

Please be mindful that submission and participation in the CPCA 5-Year Certified process does not guarantee that the institution will gain CPCA 5-Year Certified status and will be permitted to work toward the CPCA 10-Year Certified status.