

Certified Operator Renewal Checklist and Application Form



Your name exactly as you want it on your Certificate _____

Address: _____ RETA Member# _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Your RETA Certificate Number: _____ CARO CIRO CRES

Did you ...	YES/ NO	Limit of PDH for this renewal period	Total PDH claimed for this renewal period
Attend chapter meetings with technical presentations as part of the program of the meeting?		24 PDH - Provide evidence of your attendance at these chapter meetings. RETA chapters are provided authorized sign in sheets to use to provide HQ with the names of those attending and have signed in.	
Attend the RETA National Conference and did you sign in with the session moderators? (If you did not sign in, that recognition is not recoverable)		24 PDH - HQ maintains a database of this activity and provided you a certificate recognizing your attendance at those sessions. Submit a copy of your attendance certificate.	
Were you a Chapter Officer or held a position on a RETA National Committee / sub-committee?		2 PDH per office held during the renewal period – Maximum 8 per renewal period	
Teach or instruct industrial refrigeration or operating techniques in this renewal period?		2 PDH per lesson plan developed – you cannot take repeat credit when presenting a class repetitiously. Attach a copy of a course critique from your student(s)	
Author a paper that is printed in a nationally distributed magazine or technical bulletin (RETA Breeze & Tech Reports apply) – OR – did you present a paper at the RETA National Convention or to another professional society's convention?		10 PDH per article or unique presentation – Attach a copy(s) of the publication index crediting your work – or the listing of presenters at the conference you spoke at	
Take a class or participate in a training session that is recognized in the table in Appendix 500A of the RETA Policy and Procedures manual?		All 24 PDH can be earned through this training. Provide evidence of your PDH earnings by utilizing the forms provided on the RETA Website.	
		Total PDH Claimed – minimum of 24 required	

Recognizing the consequences of making improper claims as described in the RETA Code of Conduct, by my signature below I swear to the accuracy and truthfulness of the claims made to ongoing training I have received or presented in the previous 36 months of my RETA Operator's Certificate currency.

Signature of applicant: _____ **Date:** _____

Credit Card Number: _____ Credit Card Type: _____

Administration Fee Member: \$105.00 US Authorization Code: _____

Administration Fee Non-Member: \$500.00 US Expiration Date: _____

Name on Card: _____ Phone Number: _____

Billing Address: _____

(Required information) City: _____ State: _____ Zip: _____

Send receipt to(email) _____