

THE BEST LETTERS OF  
RECOMMENDATION  
YOU CAN GET.

CAE



## CERTIFIED ASSOCIATION EXECUTIVE RENEWAL APPLICATION

Thank you for your continued support of the **Certified Association Executive (CAE®) credential**. Please read and complete each section fully and accurately in clear, legible handwriting or type. All qualifying continuing education must be completed at the time the application is submitted and be within the renewal period. The completed application with payment must be received in the CAE office by the designated renewal deadline.

Please initial each page and mail, fax, or email a PDF of your completed application to:

**Mail:** ASAE CAE Program  
1575 I Street, N.W. Washington, DC 20005-1103

**Fax:** 202-220-6441

**Email:** caedept@asaecenter.org

Receipt of your application will be acknowledged within two weeks.

*There is no membership requirement to renew the CAE credential, and ASAE members and nonmembers will be evaluated equally on the renewal application. The CAE Program does not discriminate on any basis including race, sex, age, religion, national origin, sexual orientation, or disability. Additional information on program requirements, policies, and procedures is available at [whatiscae.org](http://whatiscae.org). For further assistance, contact CAE staff at 202-626-2759 or [caedept@asaecenter.org](mailto:caedept@asaecenter.org).*

## RENEWAL CHECKLIST

Please be sure to complete all four sections of this application.

- Section 1. Renewal Applicant Information:** I have completed all renewal applicant information and noted where I would like CAE mailed correspondence sent.
- Section 2. Payment:** I have included payment information with this application.
- Section 3. ASAE Standards of Conduct and Renewal Application Attestation:** I pledge to adhere to the ASAE Standards of Conduct and have signed the Renewal Application Attestation.
- Section 4. Professional Development Activities:** I have completed at least 40 hours of qualifying professional development; or a minimum of 30 hours of qualifying professional development plus a maximum of 10 hours of qualifying leadership, authorship, and/or teaching activities contributing to the association management profession.

## SECTION 1

# RENEWAL APPLICANT INFORMATION

(Please check which address you would like to be used for mailed CAE correspondence.)

**Please notify CAE staff of any changes in your contact information. It is important to keep an updated address on file with the CAE Program to ensure you receive important credential information.**

Mr.  Mrs.  Ms.  Dr. Applicant Name: \_\_\_\_\_

ASAE Member ID# (Optional): \_\_\_\_\_

Title of Present Position: \_\_\_\_\_

Organization: \_\_\_\_\_

Preferred Email: \_\_\_\_\_

Business Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Business Telephone: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Personal Email: \_\_\_\_\_

## SECTION 2

# PAYMENT

**All fees must accompany the application.** The renewal fee is \$350 for members and \$500 for nonmembers, due by December 31 of your expiration year. Fees are reduced to \$275 for ASAE members and \$425 for nonmembers if completed application and payment are received by October 31.

### Early Renewal Fees—Submitted by October 31

\$275—ASAE Member  \$425—Nonmember

### Renewal Fees—Submitted November 1-December 31

\$350—ASAE Member  \$500—Nonmember

### Payment type:

Check enclosed (payable to ASAE)  Visa  MasterCard  American Express  Discover

Cardholder Name: \_\_\_\_\_

Credit Card Account #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Zip Code of Billing Address: \_\_\_\_\_

Signature: \_\_\_\_\_

Total Payment Included: \_\_\_\_\_

Please initial each page before submitting completed application.

## SECTION 3

# STANDARDS OF CONDUCT AND APPLICATION ATTESTATION

## ASAE STANDARDS OF CONDUCT

I pledge to uphold the ASAE Standards of Conduct. The current Standards can be found at [www.asaecenter.org/standards](http://www.asaecenter.org/standards).

## APPLICATION ATTESTATION

- In making this renewal application, I fully understand that it is a renewal application only and does not guarantee renewal. I understand and, by my signature, attest that I will, now and in the future, adhere to the ASAE Standards of Conduct. I further understand that any false statement or misrepresentation that I may make in the course of these proceedings and renewal application or other violations of CAE Commission policies may result in the revocation of this renewal application or other disciplinary action by the CAE Commission.
- I understand that ASAE reserves the right to revise or update this renewal application and the Standards of Conduct, and that it is my responsibility to be aware of ASAE's current requirements. I further understand that I am obligated to inform ASAE of changed circumstances that may materially affect my renewal application. I further understand that it is my responsibility to provide ASAE with any requested documentation in connection with this application.
- I understand and agree that if I am recertified following acceptance of this application such certification does not constitute ASAE's warranty or guarantee of my fitness or competency to practice as an association executive. If I am recertified, I authorize ASAE to include my name in a list of certified individuals and agree to use the CAE designation and related ASAE trade names, trademarks, and logos only as permitted by CAE policies. I understand and agree that ASAE may also use anonymous and aggregate renewal application data for statistical and research purposes. I attest that I have no felony convictions related to the practice of association management or have disclosed any felony convictions to the CAE Commission.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## SECTION 4

# PROFESSIONAL DEVELOPMENT

You must have completed 40 credits of association management-related continuing education within your current renewal period in order to renew your CAE certification. You may include up to 10 hours of leadership activities, authorship, or teaching activities towards the credit requirement. You will receive CAE credit for actual clock time of qualifying education, including partial hours, up to a maximum of eight CAE credits per calendar day. Please provide a description to indicate program content and its relation to the Exam Content Outline.

A maximum of 20 CAE credits from self-study programs (including facilitated virtual courses) may be applied to this application. On-demand and asynchronous courses must meet the criteria for self-study programs in order to earn CAE credit. Proof of completion for self-study programs must be submitted with the renewal. Internal programs that are by staff for staff are not eligible for CAE credit.

All hours must be completed at the time of submission; future hours will not be accepted. Transcripts, certificates of attendance and agendas may be requested. When filling out the professional development section, please avoid the use of acronyms.

On the following page, please indicate the total number of hours you have submitted for credit, and provide a detailed listing for each program or activity. You may reproduce the page, or attach a similarly organized report detailing the required information. There is no requirement to attach documentation or proof of attendance at education events or background information. However, the CAE Program reserves the right to request and audit documentation confirming the information reflected on your application.

For the full criteria of qualifying programs, please visit [whatiscae.org](http://whatiscae.org).

Please initial each page before submitting completed application.

## Detailed Listing of Professional Development Activities:

Title of Program: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Presenter(s) and Presenter's Organization: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Title of Program: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Presenter(s) and Presenter's Organization: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Title of Program: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Presenter(s) and Presenter's Organization: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

Title of Program: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Presenter(s) and Presenter's Organization: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please initial each page before submitting completed application.



## Detailed Listing of Professional Development Activities (continued):

Title of Program: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Presenter(s) and Presenter's Organization: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Title of Program: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Presenter(s) and Presenter's Organization: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Title of Program: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Presenter(s) and Presenter's Organization: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

Title of Program: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Presenter(s) and Presenter's Organization: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Total Credits of Professional Development:** \_\_\_\_\_

Please initial each page before submitting completed application.



## Detailed Listing of Leadership, Authorship, and Teaching Activities

(10 CAE credits maximum in this category)

**You will receive two credits for each year of service as a volunteer in an officer or leadership capacity, such as vice chair of the board or chair of a task force. You will receive two credits for each association management session or course in which you were the content leader, and for each article, chapter, or book written on association management topics.**

Service/Title: \_\_\_\_\_

Organization/Publication: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Service/Title: \_\_\_\_\_

Organization/Publication: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Service/Title: \_\_\_\_\_

Organization/Publication: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Service/Title: \_\_\_\_\_

Organization/Publication: \_\_\_\_\_

Date(s): \_\_\_\_\_ Number of CAE Credits: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Total Credits from Leadership, Authorship and Teaching** \_\_\_\_\_

**Total Number of Credits Submitted** \_\_\_\_\_

Please initial each page before submitting completed application.