|  | **Recertification Application** |
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## APPLICANT INFORMATION

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: | **Click or tap to enter a date.** |
|  | First | Last |  |  |  |

| Address: |  |  |
| --- | --- | --- |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  | City/Town | Province | Postal Code |

| Employer: |  | | |
| --- | --- | --- | --- |
| Business Phone: |  | Email: |  |

| Employer Contact | (If you would like your employer to be notified of your Recertification status) | | | | | | | | | | |  | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Direct Supervisor: | | |  |  | | | | | |  |  | | |
|  | | | *Name* |  | | | | | | *Title* |  | | |
| Business Phone: |  | | | | | | Email: | |  | | | | | | |
|  | | | | |  |  | |  | | | | |  | |  | |
| CHECKLIST FOR APPLICATION | | | | | | | | | | | | | | | |
| Current Member with PAVRO? | | | | | YES  ☐ | NO  ☐ | | Member Since: | | | | |  | |
|  | | | | |  |  | |  | | | | | | | |
| Education – Professional Development | | | | | YES  ☐ | NO  ☐ | |  | | | | | | | |
|  | |  | | | | | | | | | | | | | |
| Consent - Permissions | | | | | YES  ☐ | NO  ☐ | |  | | | | | | | |
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## EDUCATION

The applicant must demonstrate his/her commitment to professional development through educational opportunities relevant to the Volunteer Engagement Profession.

A minimum of forty (40) hours is required OR twenty (20) hours of professional development and one written paper as instructed in the Recertification Guidelines. The sessions must have occurred within the three years preceding this application date.

Proof of attendance may be identified by scanning a copy of the receipt, copy of the agenda or the signature of the presenter or chair of the session. Imbed the document in the proof column.

(Click where you want to insert an existing document. On the **Insert** tab, in the **Text group**, click the arrow next to Object and then click **Object**. Select **Create from File** tab, **Browse** and select document, **Insert**)

| **Date Taken** | **Session** | **Presenter** | **Hours** | **Proof** |
| --- | --- | --- | --- | --- |
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|  | | Total Hours |  |  |
|  | |  |  |  |

## CONSENT

PAVRO reserves the right to retain all written papers. Publication of papers for sharing with membership may be considered. Permission of the author will be requested for consent at the time of publication.

☐I understand PAVRO has the right to retain all written papers, respecting my confidentiality.

☐ I agree PAVRO has my permission to publish my name and organization as a Certified Member in the Members Only section of the PAVRO website.

☐I certify that my answers for this application are true and complete to the best of my knowledge.

| Signature: | ***Type your name here*** | Date: | **Click or tap to enter a date.** |
| --- | --- | --- | --- |

## FEES AND PAYMENT OPTIONS

Fees for Recertification: $ 50.00 plus HST = $ 56.50. The application fee is non-refundable.

The full application package and written paper if selecting Option 2 must be received within the calendar year of application or else the submitted fee is forfeited.

☐Mail Cheque or Money Order to: PAVRO, 58 Steamer Drive, Whitby, ON L1N 9X3

☐ [VISA / MASTERCARD payment](about:blank)

## NEXT STEPS

**Option 1 – 40 Hours Professional Development**

**Step 1** Submit completed Application package with supporting documents and payment to PAVRO. PAVRO will acknowledge the receipt of your application and will contact the Recertification Coordinator to notify application complete. Recertification Coordinator will communicate if further information is required or applicant is successful.

**Option 2 – 20 Hours Professional Development and One Written Paper**

**Step 1** Submit completed Application package with supporting documents and payment to PAVRO. PAVRO will acknowledge the receipt of your application and will contact the Recertification Coordinator to notify application complete.

**Step 2** The Recertification Coordinator will connect with you to advise instructions for emailing the written paper and timelines for processing your application will be provided. Your paper will be assigned a code to protect your identity, ensuring confidentiality with Adjudicators.

**Step 3** Adjudication – Two committee members will read your paper, identified by your code, completing a scoring template. Scoring and feedback from each Adjudicator will be sent to the Chair for compilation.

**Step 4** TheCommittee Chair will compile results of scoring and communicate feedback to the Recertification Coordinator. A score of 80% or higher indicates a pass. Otherwise, the applicant has an opportunity to resubmit their paper with edits for improvement based on feedback provided within the timelines noted in the Written Paper Guidelines.

**Step 5** Communication – Recertification Coordinator will communicate the results and feedback with the applicant.

**Thank you for your commitment to excellence and the**

**Volunteer Engagement Profession by continuing to develop your career through Certification.**

***PAVRO Certification Committee***

## FOR OFFICE USE ONLY

| Date Application Received: | Payment Received: | Membership Verified: |
| --- | --- | --- |
| Date Package Forwarded: | Education Verification Received:  ☐40 Hours ☐20 Hours & Paper | Consent Verified: |