



**Renewal Application
Michigan Chapter**

Date: _____

Michigan SGMP
5859 W. Saginaw Hwy. #144
Lansing, MI 48917

Dear Laurie Nickson,

I would like to maintain my Government Meeting Specialist Certificate through the Michigan Chapter. Please review my documentation and confirm my status for certification. I have enclosed the following:

- 1. This completed application for certification
- 2. My job description
- 3. My tracking sheet confirming 20 contact hours for the last five years
- 4. Application fee \$30 made payable to MiSGMP

Submitted by (Name): _____

Title: _____

Company: _____

Street Address: _____

City, State, Zip Code: _____

Telephone: _____

Fax: _____

E-mail: _____

Signature: _____

Chapter Leader Use Only:

- Membership records: Membership Active
- Application fee included

This is to certify that I, the undersigned, have complied with all the requirements for the status of certification and submitted this evidence on the following pages; I agree to uphold high standards of ethics, a commitment to my professional responsibilities as a meeting professional and I will make every effort to contribute to my profession and to MiSGMP, I verify:

- (1) I am a member of MiSGMP
- (2) My current responsibilities are:

Employment History

Name of Employer	Dates Employed		Position\Title
	Start Date	End Date	
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I certify to the truth and accuracy of all the statements and representations made in this application.

I hereby grant permission to the MiSGMP program committee to review and verify the information contained in, or in connection with, this application.

I, (name of applicant) _____, certify I am a current member and that the information in this application is accurate and correct to the best of my knowledge.

Verification by Immediate Supervisor or Executive Director

This is to certify that the undersigned has carefully inspected the information contained in this completed application; that said the applicant has correctly and accurately checked the areas of responsibility indicated on Page 2; and that all other information supplied is to the best of my knowledge, true and accurate. Further, I certify that the applicant is known by me to possess a high degree of character and integrity and has demonstrated competence and proficiency in meeting planning assignments and responsibilities.

(Signature)

(Print or type Name)

(Position)

(Company)

(Address)

(City, State, Zip Code)

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(Telephone)