



## Government Meeting Specialist Tracking Sheet

**Name of Member:** \_\_\_\_\_

**Company:** \_\_\_\_\_

	Date Completed	Date Completed	Date Completed
<b>Education/Programming (3 programs)</b>			
<b>Facilities and Services (2 programs)</b>			
<b>Federal, State, and Local Travel (1 program)</b>			
<b>Financial and Contract Management (2 programs)</b>			
<b>Leadership (1 program)</b>			
<b>Logistics (2 programs)</b>			
<b>Protocol (1 program)</b>			
<b>Technology (2 programs)</b>			
<b>Ethics (1 program)</b>			
<b>Total class time is 15 programs</b>			

<p><b>Chapter Officer Use Only</b></p> <p><b>Date Received Application</b> _____</p> <p><b>Date Certification Granted</b> _____</p> <p><b>Member since</b> _____</p>
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