



Designation Renewal Application

Collection Industry Professional (CIP) and/or Professional Collection Manager (PCM)

ACA International, 3200 Courthouse Ln, Eagan, MN 55121-1585
 Member Services: 800-269-1607 Secure Fax: 952-926-1624 memberservices@acainternational.org

Please complete and return this application with payment to ACA Member Services. Thank you!

1. APPLICANT INFORMATION

Applicant Name: _____ Applicant ID (if known): _____

Applicant Email: _____ Your Direct Phone _____

Company Name: _____ Company ID: (if known): _____

Mailing Address: _____

2. RENEWAL REQUIREMENTS: *ACA may request attendance documentation. Attendance credits may be applied to renew more than one designation. Choose from meetings or a combination of Core Curriculum and Hot Topic courses. Each designation renewal fee must be paid separately.*

Checklist of Continuing Education Renewal Requirements	Date Attended/Completed
REQUIRED: My <u>Professional Collection Specialist (PCS) Designation</u> is current and in good standing. The PCS is a pre-requisite and must be maintained. The PCS is a 3-year renewal.	
Plus, OPTION #1: I attended an ACA meeting (Choose ONE of the following events)	
Spring Forum / Ignite 2021 _____	Annual Convention _____
Washington Insights Fly-in _____	Level Up Leadership Conference _____
Level Up Leadership Conference _____	Unit Event/Conference _____
OR Plus OPTION #2: LIST CORE CURRICULUM AND/OR HOT TOPIC COURSES ATTENDED	
Complete any ACA Core Curriculum course and/or Hot Topic seminar for a total of 4.5 professional development units (PDUs). Users must register for events to receive credit. These events may be completed in-person, live online, or as an on-demand recording. Go to page 2 to list the events and include a snapshot of copy of the event handout or self-reporting form if available.	

Title of Core Curriculum (PDUs vary) or Hot Topic (PDUs = 0.5)	Date Completed	PDUs
TOTAL PROFESSIONAL DEVELOPMENT UNITS		

Members can access their Events and Education Transcript anytime on acainternational.org. Login to the ACA website and go to MyACA >> Resources & Profile >> Profile >> Events and Education Transcript. While you are there, don't forget to download and share your Digital Badge(s).

3. MEMBER SIGNATURE

I certify that the information provided on this application is true and accurate to the best of my knowledge.

SIGNATURE: _____ DATE: _____

4. PAYMENT DUE WITH APPLICATION *Please do not email credit card data. Phone in or send a secure fax.*

___ CIP Renewal Fee \$10 ___ PCM Renewal Fee \$10 TOTAL ENCLOSED: _____

___ Check (payable to ACA International) OR Credit Card

___ Visa ___ Mastercard ___ American Express

Account #: _____ Exp: _____ CVC: _____

Name on Card: _____

Cardholder Signature/ Authorization _____