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**REQUEST TO CHANGE CERTIFICATION STATUS**

**Certified Mental Performance Consultant®**

**(CMPC®)**

**Date:**

**Last Name: First Name: M.I.: Maiden/Other Name:**

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**Home Address:** check if preferred mailing address **Business Address:** check if preferred mailing address

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| **Home Phone:** | **Business Phone:** |

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| **Email Address:** |

**Reason for Request:**

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I hereby request that the Certification Council deactivate my current CMPC® certification status and grant me CMPC® Emeritus status. My signature below attests to the following:

1. I agree to abide by the policies regarding Emeritus status as outlined in the *CMPC® Certification Program Candidate Handbook.*
2. I agree to not practice as a CMPC® and not use the CMPC® credential without adding the Emeritus descriptor (*Note:* CMPC-Emeritus or Certification Mental Performance Consultant®-Emeritus are acceptable).
3. I agree to not provide mentorship as a CMPC® for the required mentored experience for applicants pursuing certification unless I have applied for and been accepted for inclusion on the Registry of Approved Mentors.
4. I understand that I must pay annual certification maintenance fees of $10 to maintain my Emeritus certification status.
5. I understand if I allow my Emeritus certification status to lapse for failure to pay the annual certification maintenance fee that I cannot represent my CMPC® credential as being in Emeritus status.
6. I understand that I cannot return to CMPC® status or use the credential unless I re-apply for certification, meet the eligibility requirements in effect at the time of application, and pass the certification exam.

Signature Date

Please convert the completed form to a PDF and email to [certification@appliedsportpsych.org](mailto:certification@appliedsportpsych.org) with the subject line “CMPC Certification Change Request\_First Initial Last Name.”