Personal Log

for Professional Development for Renewal of Certifcation

DIRECTIONS:

1. This Personal Log (diary) is for you to keep a record of all your Professional Development Points (PDPs) as they occur. You do not need to submit your personal log for review.
2. You will need the data in this log to accurately fill out the Renewal Application Form. A Renewal Application Form will be mailed to everyone who holds an active certification six months prior to the expiration date on your current certificate. You will need to complete the Renewal Application based upon the data you have been keeping in this Personal Log. The Renewal Application must be returned to ISA, accompanied by the renewal fee, at least 60 days prior to the Expiration Date on your current certificate. The certificate issued upon recertification will show an expiration date of three years from the date of previous certification.
3. Selected Renewal Application Forms will be chosen for audit purposes. Applicants selected will be required to submit documentation verifying all activities listed on their applications. If your application is selected, you will be notified by mail.
4. The majority of your accumulated PDPs will come from Section 1, "Active Practitioner." Use a separate Verification of Employment Form for each period of employment during the three year renewal period. Photocopy extra copies of any of the Sections, as needed.

Read the ***CCST Renewal Policies*** before filling out this log. These policies will provide you with an explanation of the sections listed on this personal log.

Name of CCST _____

Certification number _____

Start month/year for renewal period _____

End month/year for renewal period _____

You should keep this log, a copy of the **CCST RENEWAL POLICIES,** and all supporting documentation in the CCST folder to be prepared at the time of renewal.

1. Work Experience (Refer to CCST Renewal Policies for definitions.)

If you are employed full-time for the three years of this certification period, signed verification of this experience should be submitted with your renewal application. This form should be completed by your current and former supervisors for each period of employment **WITHIN THIS THREE YEAR RENEWAL PERIOD.** List only one employer per page. Photocopy this form as needed. Provide original, signed forms as faxed signatures do not qualify.

Any job title or responsibility changes occurring with the same employer should be listed separately on the same page, providing the date of change and your new duties and responsibilities. If you are self-employed, complete this form to document this experience and submit it with a notarized letter from at least three of your customers, including full contact information.

_____ was employed as a(n)
name of candidate

_____
title of candidate while employed

in _____ at _____
location *name of company/organization*

from _____, _____, to _____, _____.
month *year* *month* *year*

The candidate was directly involved in the following activities during the above period of employment:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

I, _____, attest to this
name of supervisor

as the _____
title of supervisor

on this the _____ day of _____, _____.
date *month* *year*

_____ _____
signature *date*

Return form to candidate at this address: _____

_____

_____

2. Educational Training (Refer to CCST Renewal Policies for definitions.)

List all relevant college courses, workshops, seminars, technical presentations at meetings and training sessions that you attended **WITHIN THIS THREE YEAR PDP PERIOD.** Course announcements, certificates of accomplishment, documentation to prove attendance, etc., ***must*** be retained as evidence of participation in the event you are audited.

College Credit Courses

Name of school	Course title/description	Dates attended from/to	No. of hrs. earned	PD points

Offerings with Preassigned CEUs

Name of sponsor	Course title/description	Dates attended from/to	No. of CEUs	PD points

Other Less Formal Offerings

Name of sponsor	Title/description	Dates attended from/to	No. of contact hrs.	PD points

3. Professional Activities (Refer to CCST Renewal Policies for definitions.)

List all relevant activities that you participated in **WITHIN THIS THREE YEAR PDP PERIOD.** Invitations to participate, letters of appreciation, verification of membership(s) or office(s) held, etc., ***must*** be retained as evidence of participation in the event you are audited.

Presentations

Name of sponsor	Type of presentation	Title/description	Date(s) from/to	PD points

Course Instructor

Name of sponsor	Course title/description	Date(s) from/to	Contact hrs. sem/qtr. hrs.	PD points

Career Day Presenter

Name of sponsor	Event title	Location	Date(s) from/to	Student level	PD points

Professional Society Activity

Name of organization	Type of participation	Date(s) of service/attendance	PD points

4. Renewal by Exam

If you choose to test for renewal at the level you are currently certified and pass the examination, no documentation of work experience or training is necessary. Contact ISA for the current exam schedule at **www.isa.org/CCST**. Complete the **Renewal by Exam** section on the Renewal Application Form to register for an examination.

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