



Certified Clinical Anaplastologist (CCA) Renewal Application

Renewal Application: The BCCA recognizes that professional development in anaplastology does not end with the passing of a test and awarding of the credential. Practice of Clinical Anaplastology requires the constant renewal of knowledge and experience in the areas of technology, materials science, clinical practice and regulatory compliance as they relate to the field. Renewal is an important part of any respected certification program and it is required to maintain the certification after passing the exam. Renewal helps to ensure the validity and credibility of the BCCA's exam by requiring that individuals holding the designation remain updated and informed about recent developments and advances in the anaplastology industry.

The CCA credential issued by the BCCA is awarded for a term of three years. All expiration dates will be November 1st regardless of exam date. To remain in good standing, certificants are required to comply with the following renewal criteria:

1. Submission of a completed CCA Renewal Application (Parts A & B)
2. Maintenance of annual renewal fees
3. Accrual of thirty six (36) continuing education units (CEUs) during the three (3) year reporting cycle
4. Upload verification documents for the units submitted.
5. Attestation and compliance with the BCCA Code of Conduct and Administrative Procedures

Part A | Certificant Information

Personal Contact Information

Certification Number

Reporting Cycle

Full Name *
Prefix First Name Last Name Middle Initial

Address
Street Address

Street Address Line 2

City State / Province

Postal / Zip Code Country

Phone Number * -
Area Code Phone Number

Fax -
Area Code Phone Number

E-mail *

Business Contact Information

Business Name

Business Address *
Street Address

Street Address Line 2

City State / Province

Postal / Zip Code Country

Phone Number * -
Area Code Phone Number

Fax -
Area Code Phone Number

E-mail *

Mailing Address Business
 Personal

Phone Business
 Personal

Email Business
 Personal

Fax Business
 Personal
 N/A

Professional Credentials

Certification 1

Year Awarded

Mandatory CE Yes
 No

Sponsor

Certification 2

Year Awarded

Mandatory CE Yes
 No

Sponsor

Employment Information

- Primary Occupation**
- Clinical Anaplastologist
 - Ocularist
 - Prosthetics/Orthotics
 - Educator
 - Medical Illustrator
 - Maxillofacial Prosthodontist
 - Administrator
 - Researcher
 - Other

If Other, please specify

Job Title

Part B | Renewal Verification Log

Please refer to the Continuing Education Qualifying Activities Summary

1. Educational Programs

BCCA Category

Sponsor

Program Title

Start Date

End Date

CEUs

Save

BCCA Category

Sponsor

Program Title

Start Date

End Date

CEUs

Save

BCCA Category

Sponsor

Program Title

Start Date

End Date

CEUs

Save

BCCA Category

Sponsor

Program Title

Start Date

End Date

CEUs

Save

Please attach corresponding certificate(s)

Upload a File

Subtotal CEUs for Category 1

2. Formal Education/Independent Learning

BCCA Category

Sponsor Program Title Start Date End Date CEUs

BCCA Category

Sponsor Program Title Start Date End Date CEUs

BCCA Category

Sponsor Program Title Start Date End Date CEUs

Please attach corresponding certificate(s)

Subtotal CEUs for Category 2

3. Publication of Material

BCCA Category

Sponsor Program Title Start Date End Date CEUs

BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
<input type="button" value="Save"/>				

BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
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BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
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BCCA Category

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BCCA Category

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BCCA Category

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BCCA Category

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BCCA Category

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BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
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Please attach corresponding certificate(s)

Subtotal CEUs for Category 3

4. Instruction/Discussion Leader/Speaker

BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
<input type="button" value="Save"/>				

BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
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BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
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BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
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BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
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BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
<input type="button" value="Save"/>				

Please attach corresponding certificate(s)

Subtotal CEUs for Category 4

5. Volunteer Activities

BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
<input type="button" value="Save"/>				

BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
<input type="button" value="Save"/>				

Please attach corresponding certificate(s)

Subtotal CEUs for Category 5

6. Mentoring/Training Activities

BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
<input type="button" value="Save"/>				

BCCA Category

Sponsor	Program Title	Start Date	End Date	CEUs
<input type="button" value="Save"/>				

BCCA Category

Please attach corresponding certificate(s)

Subtotal CEUs for Category 6

Certificate Information

Candidates who successfully fulfill their CCA renewal requirements will receive a new certificate; official certificates will be sent within 30 business days of application approval.

Name exactly as it should appear on the certificate *

Suffix
 First Name
 Middle Name
 Last Name

Candidate Responsibility Statements


- * I understand that the CCA Renewal Application must be received on or before my renewal date.
- I have read and understand all the policies in the Candidate Handbook.
- I have read and accept the terms and responsibilities outlined in the BCCA Code of Conduct and Administrative Procedures and continuing education standards as set forth by the Board of Directors.
- I attest that I have never been convicted of, pled guilty or not contest to, a misdemeanor or felony, or any fraud, false statements, or omissions, wrongful taking of property, bribery, perjury, forgery, or a conspiracy to commit any of these offenses.
- I declare that all the information I have provided on all pages of the CCA Renewal Application is true and accurate. I understand that misrepresentations or incorrect information provided to BCCA can result in disciplinary action(s), including suspension or revocation of my eligibility, examination score, or credential.

Your CEUs

Automatic calculation of the (6) category subtotals

Signature

Date

- - 
Month Day Year

Submit Form



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