Distance Learning Center

CCC APPLICATION

Instructions: Once you have completed the required CCC courses, please fill out this application, sign it, and email it to certifications.dlc@erieri.com. We will review your application and mail your printed certificate.

Name: _____ Title: _____

Organization: _____

Address: _____

City: _____ State/Province: _____

ZIP/Postal Code: _____ Country: _____

Email Address: _____ Phone: _____

Certification Type: CCC **Track (check one):** __For Profit __Non-Profit

Completed Courses

Course Number	Course Title

☐ I prefer to receive a digital copy of my certificate instead of the printed hard copy.

I hereby attest that I have completed the required credit hours through ERI Distance Learning Center continuing education.

_____ _____

Signature Date

You may wish to retain a copy of this form for your records. If you have any questions, please send us an email at: certifications.dlc@erieri.com.