

APPLICATION FOR APPROVAL OF USE OF NAEOP NAME/LOGO

Reply to: NAEOP Executive Director
National Association of Educational Office Professionals
PO Box 12619
Wichita, KS 67277-2619

Approval for use of NAEOP name/logo is outlined below. This form **must** be submitted by one of the following: the affiliate president, area director, or individual requesting to use the NAEOP name/logo for an activity. Submit in duplicate; one copy will be returned to the applicant. **THIS FORM MUST BE TYPED.**

Name of Affiliate or Area Sponsoring Program _____

Name of Affiliate President or Area Director _____

Address _____
Mailing Address City State ZIP + 4

Telephone (w) _____ (h) _____

Email Address _____

Activity _____

Date _____

INSTRUCTIONS:

1. Submit this application with a copy of an approved *PSP Form VIII, APPLICATION FOR APPROVAL OF INSERVICE TRAINING PROGRAM* or submit both at the same time to the Executive Director.
2. Include copy of brochure, letter, and/or other materials showing use of NAEOP name/logo and disclaimer to be approved.
3. Include signed copy of complete disclaimer statement – *National Association of Educational Office Professionals (NAEOP) Disclaimer Agreement for Use of Name/Logo.*

Disclaimer to be used on materials:

*“The use of the name/logo of the National Association of Educational Office Professionals (NAEOP) pertains to the endorsement of the curriculum and training materials **only**. NAEOP does not endorse any other curricular / administrative decision for the program.”*

For Office Use Only

The use of the NAEOP name/logo is approved
 not approved

Remarks:

Date: _____

NAEOP Executive Director

**NATIONAL ASSOCIATION OF EDUCATIONAL OFFICE PROFESSIONALS
(NAEOP) DISCLAIMER AGREEMENT FOR USE OF NAME/LOGO**

“The National Association of Educational Office Professionals (NAEOP) name/logo on this printed material (i.e. program/flyer/brochure/websites, etc.) indicates that the educational portions of the program meet the criteria established by the national association (NAEOP). The national association (NAEOP) has established standards to ensure that the programs help train office professionals to continue a life-long learning process of continuing education. This endorsement pertains to curriculum and training materials **only**. The endorsement does not extent to extra curricular activities or administrative decisions concerning the program. By this endorsement, the national association (NAEOP) does not agree to be bound to, nor does it accept responsibility for any contractual obligations or debts owed or incurred by the local agency responsible for organizing the individual event.”

Name of Affiliate or Area Sponsoring Program_____

Name of Affiliate President or Area Director_____

I, as Affiliate President or Area Director, agree to the above statement.

Signature of Affiliate President or Area Director

Date_____

Subscribed and sworn to before

this _____ day of _____, 20____

_____, Notary Public

My commission expires_____

Submit this form with the Application for Approval of Use of NAEOP Name/Logo

For Office Use Only

Application for Approval of Use NAEOP Name/Logo
Date approved:_____

Application for Approval of Inservice Training Program (PSP Form VIII)
Date approved_____

Date

Executive Director