

**PROFESSIONAL ACTIVITY RECORD**  
**Inservice Training in Seminars and Workshops**

Reply to: NAEOP PSP Registrar  
Professional Standards Program  
National Association of Educational Office Professionals  
1999 N Amidon Ave., Ste. 325  
Wichita, KS 67203

Date \_\_\_\_\_

Form must be verified by your local, state, or national PSP Chairman or local/state president or PSP Governing Board member. If you hold one of these offices, it is not permissible to verify your own forms. **PLEASE COMPLETE ELECTRONICALLY AND PRINT or email to [pspreistrar@naeop.org](mailto:pspreistrar@naeop.org).**

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_  
Mailing Address City State ZIP+4

Email Address \_\_\_\_\_

**NATIONAL, STATE, LOCAL, AND WORK-RELATED PROFESSIONAL ASSOCIATIONS  
AND EDUCATIONAL INSTITUTIONS**

IMPORTANT: Attach copies of signed certificates of attendance/completion for all workshops/seminars since July 1, 1980 listed below.

<i>Sponsoring Organization</i>	<i>Title of Program</i>	<i>Date</i>	<i>Hours</i>	<i>Minutes</i>

All hours and minutes accrued above 60 hours may be applied toward next certificate level. Total Hours \_\_\_\_\_

I certify the above statements to be correct according to my knowledge.

I verify the above statements to be correct according to documents attached to this form.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of PSP Chairman (local or state) or President (local or state) or PSP Governing Board member (signee must be a current NAEOP member and hold a current PSP Certificate). Circle appropriate one.

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Name of Association

Date \_\_\_\_\_

If you need additional writing space, please use duplicate copy of this form.

Continued from Form IIIa

NATIONAL, STATE, LOCAL, AND WORK-RELATED PROFESSIONAL ASSOCIATIONS  
AND EDUCATIONAL INSTITUTIONS

<i>Sponsoring Organization</i>	<i>Title of Program</i>	<i>Date</i>	<i>Hours</i>	<i>Minutes</i>

All minutes and hours accrued above sixty (60) hours may be used toward next PSP certificate level.

Total hours \_\_\_\_\_

**INSTRUCTIONS FOR FORM IIIa**

NATIONAL, STATE, LOCAL, AND WORK-RELATED PROFESSIONAL ASSOCIATIONS  
AND EDUCATIONAL INSTITUTIONS

<i>Sponsoring Organization</i>	<i>Title of Program</i>	<i>Date</i>	<i>Minutes</i>	<i>Hours</i>
National Association of Educational Office Professionals**	Psychology Institute Class	7/90		30
	Institute	4/1/95		15
	Annual Meeting	7/95		12
	Advisory Council	7/10/95		3
	Membership Briefing	7/10/95		1
	Memory Workshop	7/9/95		6
	Problem Solving	7/8/95		3
	Golden Key	7/8/95		3
NAEOP Foundation	Add a Bit to the Job	3/25/96		6
State Educational Office Professionals Association	Annual Meeting	11/2/02		6
Local Educational Office Professionals Association	Business Meetings Listening Workshop (*)	11/3/01		6
____ Educational Institution	Staff Development Seminar	4/15/02		6

All minutes and hours accrued above sixty (60) hours may be used toward next PSP certificate level.

Total Hours 97

↑  
Program planned or sponsored by:  
Name of group  
(begin with National)

↑  
Name of Program: convention, conference, institute,  
workshop.  
  
Indicate with an (\*) program approved on Form VIII.

\*\* NAEOP Institute may be used to meet education requirements or Inservice Training Workshop/Seminar points.

If you need additional writing space, please use duplicate copy of this form.

Revised 08/18