



Application for CIC[®] Emeritus Status

Once you have completed this document including any and all supporting documents, please email to info@cbic.org.

Contact Information

Name (First/Last, Credentials): _____

Candidate ID Number: _____

Years Certified: _____

Address: _____

Contact Email: _____

Previous employer name and contact info: _____

Retirement Attestation

By completing this application, I agree that:

- I currently hold the CIC[®] credential and am in good standing with CBIC.
- I am retired from full-time employment or am entering retirement during the year I am up for recertification.
- If I am applying as a lapsed candidate, I verify that I am entering retirement or have retired from full-time employment and am applying for CIC[®] Emeritus status within five years since lapsing.
- I will use the credential as "CIC[®] Emeritus" only. I am no longer permitted to use the "CIC[®]" credential.
- I understand that I am required to notify CBIC if I become full-time employed again and will no longer meet the requirements for Emeritus Status.
- I understand that if I become full-time employed again or do not meet any of the above requirements and would like to become a CIC[®] again, I must re-apply, pay for, and pass the initial CIC[®] examination.
- I understand that as a CIC[®] Emeritus I am no longer required to earn continuing education (CE) credits or take the recertification examination.
- I understand that I will no longer be listed in the online Find a CIC[®] directory.

Signature

Signature and Date _____