

# APPLICATION FORM FOR USAV-CAP RECERTIFICATION

\*Name: \_\_\_\_\_  
School/Team/Organization Coaching for: \_\_\_\_\_  
\*Home Address: \_\_\_\_\_  
\*Home PH: \_\_\_\_\_ \*Work PH: \_\_\_\_\_ or \*Cell PH: \_\_\_\_\_ Fax: \_\_\_\_\_  
\*Email(s): \_\_\_\_\_  
\*USAV Region: \_\_\_\_\_ \*Date of Birth: \_\_\_\_\_  
\*Member Number: \_\_\_\_\_ or \*Last 4 SSN: \_\_\_\_\_ *\*Required info*

Instructions: Choose ONE of the following two methods to apply for your recertification and return this form, and any **ORIGINAL MODULE CERTIFICATES**, if applicable, **NO EARLIER THAN 90 DAYS PRIOR TO THE EXPIRATION DATE OF YOUR CURRENT CAP CERTIFICATION** - to:

USAV-CAP  
715 South Circle Drive  
Colorado Springs, CO 80910

*Make a copy of this form and your original Module Certificates and keep in your Coaching Accreditation file!*

My Last CAP Certification Date and Level: \_\_\_\_\_  
Date I am mailing this Application for Recertification: \_\_\_\_\_  
My last USAV Background Screen Cleared Date: \_\_\_\_\_ Expires on: \_\_\_\_\_

1. I attended a **FULL/REGULAR CAP Course** and wish to apply for recertification at the following Level:

CAP Level I       CAP Level II       CAP Level III       CAP Level IV  
Course Date - \_\_\_\_\_ Course Site & Code # - \_\_\_\_\_  
Cadre/Instructors - \_\_\_\_\_

2. I attended the following **APPROVED CAP MODULES** and wish to apply for recertification at the following Level:

CAP Level I - 4 Modules     CAP Level II- 5 Modules     CAP Level III - 6 Modules     CAP Level IV - 8 Modules

Module 1:  
Date - \_\_\_\_\_ Site - \_\_\_\_\_  
Title - \_\_\_\_\_ Instructor - \_\_\_\_\_  
Module Certificate expiration date: \_\_\_\_\_

Module 2:  
Date - \_\_\_\_\_ Site - \_\_\_\_\_  
Title - \_\_\_\_\_ Instructor - \_\_\_\_\_  
Module Certificate expiration date: \_\_\_\_\_

Module 3:  
Date - \_\_\_\_\_ Site - \_\_\_\_\_  
Title - \_\_\_\_\_ Instructor - \_\_\_\_\_  
Module Certificate expiration date: \_\_\_\_\_

Module 4:  
Date - \_\_\_\_\_ Site - \_\_\_\_\_  
Title - \_\_\_\_\_ Instructor - \_\_\_\_\_  
Module Certificate expiration date: \_\_\_\_\_

*(#1-4 above applicable for CAP Level I)*

Module 5:  
Date - \_\_\_\_\_ Site - \_\_\_\_\_  
Title - \_\_\_\_\_ Instructor - \_\_\_\_\_  
Module Certificate expiration date: \_\_\_\_\_

*(#1-5 above applicable for CAP Level II)  
(#6-8 on back- applicable for CAP Level III and IV)*

-----  
 Module 6:  
Date - \_\_\_\_\_ Site - \_\_\_\_\_  
Title - \_\_\_\_\_ Instructor - \_\_\_\_\_  
Module Certificate expiration date: \_\_\_\_\_

Module 7:  
Date - \_\_\_\_\_ Site - \_\_\_\_\_  
Title - \_\_\_\_\_ Instructor - \_\_\_\_\_  
Module Certificate expiration date: \_\_\_\_\_

Module 8:  
Date - \_\_\_\_\_ Site - \_\_\_\_\_  
Title - \_\_\_\_\_ Instructor - \_\_\_\_\_  
Module Certificate expiration date: \_\_\_\_\_

*(#1-8 above applicable for CAP Level III and IV)*

COMMENTS OR NOTES:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

◆ ----- ◆  
FOR USAV-CAP OFFICE USE ONLY:

Date Materials received in USAV-CAP Office: \_\_\_\_\_ By: \_\_\_\_\_

Date Re-Certification granted: \_\_\_\_\_ By: \_\_\_\_\_

New Certification Date to be entered: \_\_\_\_\_ Entered By: \_\_\_\_\_

New Expiration Date: \_\_\_\_\_

New Certificate of Accreditation Mailed Date: \_\_\_\_\_ By: \_\_\_\_\_

Emailed Date: \_\_\_\_\_ By: \_\_\_\_\_