

# CONTINUING EDUCATION REQUEST FOR NON TRADITIONAL APPROVAL

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For prompt evaluation and credit determination, this form must be completed in its entirety. A separate form must be submitted for EACH course.

Contractor Name: \_\_\_\_\_ Certification No. \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_  
Home Business

Company Name: \_\_\_\_\_

**FEES: As of August 1, 2009 Non Traditional Application \$25.00**

## CONTINUING EDUCATION COURSE DESCRIPTION:

Class Title: \_\_\_\_\_

Location: \_\_\_\_\_

Instructor: \_\_\_\_\_

Date Class Taken: \_\_\_\_\_ Continuing Education Hours: \_\_\_\_\_

Additional Information: \_\_\_\_\_

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You must include a copy of all the following information in order to have this request reviewed for approval:

- Program, brochure or other information which provides a description of the course.
- Instructor's credentials or resume.
- Proof that you attended the course.

The completed form and required information should be forwarded to:

Board of Heating, Air Conditioning and Refrigeration Contractors  
8 Commerce Street, Suite 200/P.O. Box 305025  
Montgomery, Alabama 36104

(334) 241-0840  
(866) 855-1912 (Toll-Free)  
(334) 265-0570 (Fax)