

NHAA Certification Application

Date: _____

Name of Applicant: _____

Home Address: (street, city, state, zip)_____

Home Telephone: _____

Company Name: _____

Company Address: (street, city, state, zip)_____

Work Telephone: _____

Application for the Certification Examination must be accompanied by a **non-refundable fee** of **\$65.00** and a **comprehensive resume** including educational, employment, professional letters of reference, experience requirements, et cetera as outlined in the "**Qualifications and Exam Eligibility Requirements**" in our CERTIFICATION PROGRAM web page.

The resume must include names, addresses, dates and telephone numbers for all education, employment, experience history, et cetera as specified. This information must be received by March 1st and September 1st respectively.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. Certification Exam Applications (including all required documentation) will NOT be accepted online.

Make Checks Payable To:

New Hampshire Arborists Association

Mail Application and Check to:

New Hampshire Arborists Association

PO Box 16006

Hooksett, NH 03106