



## Application for Renewal of the National Professional Certification in Customer Service

**Y**ou have held the National Professional Certification in Customer Service for three years and your achievement demonstrates that you possess the knowledge and skills which are important for successful employment in the sales and service industries. In order to maintain your certification credentials, you must now complete the following renewal application and return it to the NRF Foundation.

### Certification Renewal Process

This application is designed to collect the information needed to renew your certification status. Once you are awarded certification renewal, NRFF will maintain your approved status in the national database for a period of three (3) additional years, unless certification is revoked prior to the end of the three year period. Your certification status may be shared with potential employers, educational institutions, and others. NRFF will notify you of future renewal dates and requirements.

### Nondiscrimination

NRFF values the creation of opportunities for everyone and embraces diversity. NRFF does not discriminate among applicants on the basis of age, gender, race, religion, national origin, disability, sexual orientation, or marital status.

### Confidentiality

Your application information will be kept strictly confidential. Except for disclosing an individual's certification status as stated herein, NRFF provides data only in aggregated group form that cannot be linked to any individual, unless an individual specifically requests release of his or her information to a specifically designated party.

### Certification Renewal Requirements

To be eligible for certification renewal, you must verify your employment in the sales or service industry or enrollment in a related training program during the past three years. NRFF may conduct random audits and may request employment verification information to confirm compliance with this provision.

### Certification Renewal Fee

A certification renewal fee of \$25 must accompany this application. You may remit the renewal fee by credit card (MasterCard or Visa), money order, or cashier's check.

### Appeals

You may appeal decisions related to this application for certification renewal. Requests must be in writing and signed. Mail requests to: NRF Foundation / Certification Department, 325 7<sup>th</sup> Street NW, Suite 1100, Washington, DC 20004.

### Revocation

Certification may be revoked for any of the following:

- Failing to abide by the rules regarding confidentiality of any NRFF assessment materials, as stated in the candidate agreement
- Obtaining a certificate or renewal of a certificate through any use of fraud or deceit
- Unauthorized or illegal use of the certificate
- Unauthorized or illegal use of any registered mark or logo owned by the NRFF or its certification programs
- Conviction of a felony or conviction of a misdemeanor or petty offense involving theft
- Conviction of a felony, misdemeanor, or petty offense for act done in connection with activities covered by the certification

### Representation of the Certification

The title of this certification is "National Professional Certification in Customer Service." If you renew the certification, you may be called a "Nationally Certified Professional in Customer Service." No other representation of the certification may be made.



**CANDIDATE IDENTIFICATION INFORMATION**

Title  Ms.  Mrs.  Mr.  Dr.

**How should your name appear on the certificate?**

First \_\_\_\_\_  
Middle \_\_\_\_\_  
Last \_\_\_\_\_

**Mailing Address for the Renewal Certificate**

Address \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address \_\_\_\_\_

Phone Number \_\_\_\_\_

Customer Service Certification Number (optional)  
\_\_\_\_\_

Date of Birth (needed for ID verification) \_\_\_\_\_

**EMPLOYMENT VERIFICATION INFORMATION**

Please verify your employment or enrollment in a related training program by checking one of the boxes below.

I have been employed in the sales or service industry or have been enrolled in a related training program during the past three years.  
 Yes  No

Please note that NRFF may perform a random audit of your renewal application and may request documentation to confirm your employment history.

**RELEASE AND TRUTHFULNESS AGREEMENT**

I agree that NRFF may verify my employment status by contacting me or other parties for documentation of my employment history. I agree that NRFF may confirm to others that I have earned the National Professional Certification in Customer Service or that I no longer hold such a credential, as applicable, and I release NRFF from any liability associated with such disclosure or in connection with this Certification. I understand that my application information will be kept confidential and will not be shared with any person or entity for any reason except as may be required by law.

To the best of my knowledge, I have answered all of these questions truthfully. I understand that any untruthful answer can jeopardize my eligibility for certification or renewal and agree to represent the certification only as described in this application under "Representation of the Certification." I understand the policies in the Certification Handbook and I agree to comply with these policies. I further agree to abide by all continuing requirements of the certification as they may be amended from time to time, including remaining in good standing with my employer, school, or training program. I understand that my certification may be revoked for the violation of any of the rules or requirements of NRFF, including those in the Certification Handbook, the Candidate Agreement, and the certification application.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

**PREFERRED PAYMENT METHOD**

Credit Card  Money Order  Check

Checks (in the amount of \$25) should be made payable to CASTLE Worldwide, Inc., and should be submitted with a copy of this application to:

CASTLE Worldwide, Inc.  
900 Perimeter Park Drive, Suite G  
Morrisville, NC 27560

Check/Money Order enclosed

Credit card payment:  MasterCard  Visa

Amount:           \$25.00          

Authorized name on card: \_\_\_\_\_

Expiration date: \_\_\_\_\_

Credit card account number: \_\_\_\_\_

Authorized credit card holder's signature:  
\_\_\_\_\_

Mailing address for credit card billing:  
\_\_\_\_\_  
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