



# CERTIFIED PLANT PROFESSIONAL (CPP) RENEWAL APPLICATION

---

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

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Current employer: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

A total of 25 points are required for certification renewal. Please use the following coding system for educational categories:

- |      |   |
|------|---|
| Code | Category  |
| 1    | Successfully passed MNLA plant identification examination again |
| 2    | Convention seminars   |
| 3    | Community outreach  |
| 4    | Mentoring certification students                                |

Category Code	Date	Description of Activity	Points
		<i>TOTAL POINTS</i> <i>(must equal or exceed 25)</i>	

**Mail to:** Montana Nursery & Landscape Association  
PO Box 20353  
Billings, Montana 59104-0353  
or Fax 406.633.2032

Questions?

406.755.3079