



CEBT RECERTIFICATION APPLICATION

To maintain certification status, complete the requirements listed below and submit this application before certification expires. Note: Applications will only be accepted for those whose certification expires this year.

- Submit a Recertification Application by December 31 of the year certification expires.
- Obtain 16 Continuing Education Credits (CEUs), and confirmed attendance at two of the following courses every three (3) years:
 - a. EBAA Technician Skills Workshop
 - b. EBAA Medical Advisory Board Meeting
 - c. EBAA Medical Directors Symposium
 - d. EBAA Scientific Session (*includes Scientific Symposium or Cornea & Eye Banking Forum*)

Refer to the EBAA "Criteria for Certification and Recertification of Eye Bank Technicians," for additional information or contact Genevieve Casaceli at EBAA at (202) 775-4999 ext. 120.

DIRECTIONS

- 1) Type or print all information legibly.
- 2) Early submission is suggested (sixty (60) calendar days prior to expiration of certification).
- 3) Make sure you have earned the necessary CEUs before submitting application. CEUs can be found under "My Information" in the Member's Section of the EBAA Website (www.restoresight.org).
- 4) Include CEU approval documents you may have received for attending non-EBAA events.
- 5) Submit payment to the Eye Bank Association of America (checks and credit cards are accepted).

RECERTIFICATION FEES

	EBAA Members	Non-Members
Early Bird (ends Nov. 30):	\$450	\$850
On & After December 1:	\$550	\$950

Name: _____

Eye Bank or Affiliation: _____ Title/Position: _____

Business Address: _____

City _____ State _____ Zip Code _____

Home Phone#: _____ Business Phone#: _____ Fax #: _____

Email Address: _____

Date Certified: _____ Date of Last Recertification: _____

PAYMENT INFORMATION

Card Type: VISA MasterCard AmEx Check enclosed in US Currency

Card Number: _____ Exp. Date: _____

Cardholder Name: _____

Signature: _____

Billing Address (Zip Required): _____

SUBMIT THIS FORM TO THE EBAA WITH PAYMENT.
E-MAIL: Genevieve@restoresight.org
FAX: (202) 429-6036
MAIL: EYE BANK ASSOCIATION OF AMERICA
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