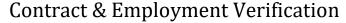
Plant California Alliance

California Certified Nursery Professional





Mandatory Contract Information – All Information is Required

Contract and Work Verification are required for exam registrants.

CONTRACT

I hereby agree to abide by the following rules governing California Certified Nursery Professionals [™] and further agree to abide by any future additions or changes to these rules as adopted by the California Certified Nursery Professional Committee, a subsidiary group sponsored by the Plant California Alliance.

- 1) I will demonstrate the highest ethical standards in my own conduct and in that of my nursery work.
- 2) I will make continued efforts to learn more about nursery products and improve my skills as a nursery salesperson.
- 3) I understand that should I be granted certification by the CCN Pro Committee, such certification is limited to a stated time period and must be renewed every year by payment of additional fees.
- 4) I understand that the CCN Pro Committee may suspend or revoke my certification for any reason it deems appropriate.
- 5) I agree that should my certification lapse because of non-payment of renewal fees or should my certification be suspended or revoked, I will not display any distinguishing emblems or titles or in any manner imply or publicize that I am certified. I understand that if found to have done so, my certification may be revoked permanently.
- 6) I agree to promote and use the CCN Pro status so long as I am actively certified.
- 7) I understand that the CCN Pro status is granted by the nursery industry as recognition of knowledge and achievement for those nursery professionals who voluntarily qualify. CCN Pro status is in no way mandatory and may be granted or refused or revoked at the discretion of the CCN Pro Committee. Upon granting of CCN Pro status, the recipient is entitled to be called a CALIFORNIA CERTIFIED NURSERY PROFESSIONAL and use the initials CCN Pro after his or her name in addition to displaying the CCN Pro emblems in all forms.
- 8) I have read and understand all of the General Guidelines for Certification as a California Certified Nursery Professional.

In making this request for certification, I AGREE to all of the above requirements with no reservations.

Applicant's Name (please print)	
Applicant's Signature	Date
Applicant's Email Address	

CALIFORNIA EMPLOYMENT VERIFICATION

Applicant must have worked in a California nursery a minimum of 18 months full time (40 hours per week) or 3,120 cumulative hours to qualify for this exam. If experience is with multiple employers, a signature from each employer is required. You may make copies of this form or request additional employment verification forms from the PCA office.

Applicants for retesting who have verification on file do not need to complete the following.

Nursery Name				
Address				
City/State/Zip				
Employed From	to	=	Months/	Hours
nployer's Signature			Date	
Employer Email		Phone		
Nursery Name				
Address				
City/State/Zip				
Employed From	to	=	Months/	Hours
Employer's Signature			Date	
Employer Email		Phone		
Nursery Name				
Address				
City/State/Zip				
Employed From	to	=	Months/	Hours
Employer's Signature			Date	
Employer Email		Phone		
I hereby certify that the wo true and correct, and if for Committee can deny application or revoked.	ound to be inaccu	rate, the California	Certified Nurse	ry Professional
Applicant's Signature			Date	