

Regional/National Merit Request Form – Not Annual

*Merit certificates will be mailed to the contact person on this form.
Requests must be sent at least two weeks prior to the event in order to receive merit certificates for the event date.*

Affiliate Name: _____ Affiliate Event Date(s): _____

Affiliate Meeting Name: _____ Contact Person: _____

Email: merits@ppa.com
Mail: PPA - MERITS
 229 Peachtree St. NE, Suite 2300
 Atlanta, GA 30303

Address: _____

City, State, Zip: _____

Phone: _____

E-mail: _____

Maximum of four merits in any one calendar year to a member of the affiliate issuing merits, except for PPA Continuing Education merits.
 President ineligible for merits other than for service as president, except for PPA Continuing Education merits.
 National and Regional members ARE eligible to receive merits for participation within their own affiliate.

Meeting or Seminar (NOT annual) with 6.5 hours of education per day

A maximum of two merits per person per meeting, with a maximum of two merits per calendar year.

CHAIRMAN: 2 Service Merits (Merit code: 243)

In the case of co-chairmanship of an event, chairmen may take one merit each for a total of no more than two merits.

Name	PPA ID #	Member of this regional/national affiliate?	
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

SPEAKER: 2 Speaking Merits each (Merit code: 241)

Name	PPA ID #	Member of this regional/national affiliate?	
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

ATTENDEE (PPA CONTINUING EDUCATION): 1 Service Merit each (Merit code: 376)

- | | |
|---|---|
| <input type="checkbox"/> Yes, I held an approved PPA Continuing Education class and will email the attendee roster to merits@ppa.com . Roster should be in Excel and include: first name, last name, email and PPA ID number | <input type="checkbox"/> No, I did not hold a PPA Continuing Education class. |
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Program (NOT annual) with less than 6.5 hours of education

A maximum of one merit per person. Attendees are not eligible for PPA Continuing Education merits.

CHAIRMAN: 1 Service Merit (Merit code: 237)

Name	PPA ID #	Member of this regional/national affiliate?	
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

SPEAKER: 1 Speaking Merit each (Merit code: 238)

Name	PPA ID #	Member of this regional/national affiliate?	
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No