

CERTIFIED COUNTY CLERK (CCC) PROGRAM
School of Government, University of North Carolina – Chapel Hill
North Carolina Association of County Clerks (NCACC)

APPLICATION FOR MASTER CERTIFICATION

PERSONAL INFORMATION

Name (As it will appear on the certificate): _____

Title: _____ Governmental Unit: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail address: _____

Please check each applicable space below and enclose the supporting documentation, as indicated:

I am currently an active member of the North Carolina Association of County Clerks.

I received my last certification in _____ (year).

Designation as a North Carolina Master County Clerk will require a prerequisite of 6 years as a NC Certified County Clerk and 45 hours of continuing education in addition to the required regular 60 hours that must be obtained within a three year period. The additional 45 hours may be accrued over time and does not have to be within the three year period. Once the master certification is achieved, the advanced certification can be maintained as long as the Clerk accrues the regular 60 hours of continuing education and participation every three years. Recertification is required every three (3) years and the recertification period begins January 1 in the year you received your certification. Recertification forms must be received by the Association on or before January 31 in the year your certification expires. *A copy of your transcript from the NC School of Government or other proof of attendance at North Carolina Association of County Clerk's academy classes and schools is required for proof of the required **sixty (60) hours plus 45 additional hours for Master certification.***

Please list trainings/conferences attended since last certification (attached required documentation):

- Clerks' regional academies
Dates attended/hrs _____ total _____
- Master Municipal Clerk Academy Classes
Dates attended/hrs _____ total _____
- Other School of Government Courses/work related course
Course name/date/hrs _____ total _____
- Member Executive Board (4 hrs per year served)
Dates served _____ total _____
- Chair of Clerks' Association Committee (2 hrs per year served) and/or
Member(1hr per year) of Committee/date _____ total _____
- NC Association of County Commissioners Annual Conference (3 hrs per
conference—*must show proof of registration*) location/date _____ total _____

National Association of Counties Annual Conference or Legislative Goals Conference (1 hr) -- *must show proof of registration* location/date _____ total _____

Hosting the Clerk's Conference or a State Association (NCACC, NACo or other) (3 hrs) location/date _____ total _____

Other course work; webinars; certifications that enhance the ability to perform Duties as Clerk (hourly credit) *must show proof of registration* location/date _____ total _____

Total: _____

I have enclosed the \$35 recertification fee, which includes a certificate. (Please make checks payable to the School of Government.)

I hereby apply for Master Certified County Clerk status with the North Carolina Association of County Clerks and the School of Government. I acknowledge that continuous membership in the North Carolina Association of County Clerks is required to retain and use the MCCC Designation.

Signature: _____

Date: _____

Designation as a North Carolina Master County Clerk is valid for 3 years. Recertification with 60 credit hours is required and failure to submit a recertification form, fee and required documentation to the Chair of the Recertification Committee for the Clerk's Association on or before January 31 of the year recertification is required will result in a lapse of said designation. To reinstate said designation, a new application must be submitted.