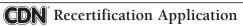


Emeritus Status Application



Nephrology Nursing Certification Commission





Emeritus Status Application

To obtain Emeritus status, the applicant must meet the following criteria: the certificant must be older than 50 years of age, must have previously held an NNCC credential, and must not be actively practicing nursing.

If approved, the certificant may use the Emeritus credential to acknowledge previous attainment of the active credential and the accomplishments it signifies in correspondence and in attendance at nephrology organization events and other nephrology nursing activities.

If the certificant chooses to return to nursing practice and wishes to reacquire the active credential he/she must meet current eligibility criteria and again certify by examination.

INSTRUCTIONS

Complete the application for Emeritus status and submit a copy of your government issued photo ID. Please print or type all information requested. The application must be completed and signed to be processed. Applications for Emeritus Certification Status must be received prior to the certification expiration date, no later than the last day of the month in which your certification expires.

Application Fee ☐ \$100		
Payment Method (check one):	(payable to NNCC) 🗖 Charge my credit card	
1. Name		
Last Maiden	First	Middle
2. Expiration date of current certification		
3. Home address		
Street/P.O. Box	City/Province State/Country Zip	/Country Code
4. Personal phone		
5. Fax E-Mail	Last 4 digits of social security numb	er
6. Date of Birth/(month/day/year)		
7. Has your address changed in the past three (3) years? \Box y	res ☐ no	
I hereby attest that I have read and understand the NNo apply for Emeritus Certification Status and verify that all info		oklet. I hereby
Applicant's Legal Signature:	Date:	
Credit Card Au	thorization Form	
The NNCC accepts only Visa, MasterCard or Discover credit cards.	Home telephone:	
Name:	Work telephone:	
Address: (as it appears on your credit card statement)	Charge my card in the amount of \$	
	Card number:	
City:	CVV: Expiration date:	
State: Zip: Country:		
	Authorized Signature Required	Davies d 1/2022



Did You Remember to ✓ □ Complete Emeritus Status Application? □ Include a copy of Government Issued Photo ID? □ Include the appropriate fee? □ Sign and date the application?

Mail completed application to:

NNCC PO Box 56 Pitman, NJ 08071-0056

If using a credit card for payment, you may fax your complete application to NNCC at 856-582-0030.