



The American Planning Association's
Professional Institute
**American Institute
of Certified Planners**
Making Great Communities Happen

REQUEST FOR LIFE MEMBERSHIP STATUS

I verify that:

1. I have been an active and continuous APA member for at least 25 years; and
2. I am at least 65 years of age.

REQUEST FOR AICP CERTIFICATION MAINTENANCE (CM) EXEMPTION

- ☐ For individuals who are not retired:

I request the option to satisfy CM requirements with a minimum of 16 CM credits, including 1.5 credits each of law and ethics, per reporting period.

- ☐ For individuals who are retired:

I verify that:

1. I am completely retired and do not engage in any planning-related profession, business, or trade (excludes part-time non-planning or nonprofessional work); and
2. I request complete exemption from CM requirements.

Name (Print Name)

APA ID

Signature

Date

Please return this form to:

MAIL TO:

American Planning Association
c/o: Membership Department
205 N. Michigan Ave., Suite 1200
Chicago, IL 60601

FAX TO:

312-786-6700

EMAIL TO:

billings@planning.org

For Office Use Only:

Reviewed by (Membership): _____ Date : _____

Reviewed by (AICP Dept.): _____ Date : _____

