



2010 CERTIFICATION MAINTENANCE

December 2009

Dear Colleague:

To maintain the designation of Certified Archivist, you must recertify and renew your professional credentials every five years. Attached you will find the 2010 form for Certification Maintenance. More information on the recertification process is available on the ACA web site: www.certifiedarchivists.org. If you are due to recertify this year, we appreciate your commitment to this important professional process.

There are two methods for Certification Maintenance — by examination or by petition.

If you opt for Certification Maintenance by examination, please complete Part I on the Application Form for Certification Maintenance and return it to the ACA office (1450 Western Avenue, Suite 101; Albany, NY 12203) by May 15, 2010. The examination will be held August 11, 2010 (see the form for available sites).

If you opt for Certification Maintenance by petition, you will use the Application Form for Certification Maintenance to summarize information about the qualifying archival activities you have completed in the period between January 1, 2005 and December 31, 2009.

The Application Form consists of:

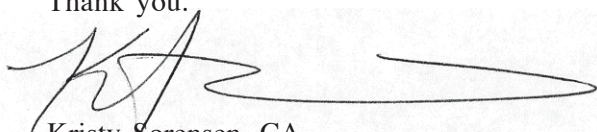
1. A cover page for basic information, recertification options, and credit totals (Pet-1);
2. Four pages summarizing credits claimed for each of the five sections (Pet-2 - Pet-5);
3. A template for formatting your detailed list of qualifying archival experiences (Pet-6 - Pet-9) [**Note:** For your convenience this is also available as an editable Word document on the ACA web site.];
4. A “Declaration” to be signed and dated by the petitioner.

In addition to the summary of credits on the Application Form for Certification Maintenance, you will need to provide a **separate document** with a detailed list of your qualifying archival experiences. A suggested template for formatting this part of the petition is included in this packet and also available on the ACA web site as a downloadable Word document (Pet-6 - Pet-9). Further information on completing the petition, including definitions, special instructions, and descriptions of the archival domains, will be available on the ACA website in January 2010.

To submit your petition, please make sure the form is filled out completely and accurately and that your name appears on each page, and **send the original and ONE COPY** of pages Pet-1 through Pet-5 of the application, all the pages documenting the details of your qualifying archival experience formatted according to the Word template (pages Pet-6 through Pet-9) and the signed and dated Declaration to: The Academy of Certified Archivists, 1450 Western Avenue, Suite 101; Albany, NY 12203 **BY JUNE 1, 2010**. Please fill out and return the first page of this form (Pet-1) whether you intend to recertify by petition or by examination.

More information on the recertification process, including tips for completing your petition, will be available on the ACA website. If you have any additional questions, please contact the Regent for Certification Maintenance: Kristy Sorensen, CA, Austin Presbyterian Theological Seminary, 100 E. 27th Street; Austin, TX 78705; Fax 512-322-0901; phone 512-404-4875; e-mail: ksorensen@austinseminary.edu.

Thank you.



Kristy Sorensen, CA
Regent for Certification Maintenance

**Academy of Certified Archivists
Certification Maintenance
2010**

Petitioner's Check List

- _____ First page of application form filled out (Pet-1). Check addition in Part II.

- _____ Pages Pet-2-Pet-5 of application form (credit sections) filled out and totaled.

- _____ Qualifying Archival Experience sheets prepared according to format instructions, Pet-6 through Pet-9.

- _____ Petitioner's Declaration signed and dated.

- _____ 1 copy made of the original completed petition form, Pet-1-Pet-5, pages reporting qualifying experience based upon Pet-6 and Pet-9 format; and the Petitioner's Declaration.

- _____ Original petition plus 1 copy returned to ACA, 1450 Western Avenue, Suite 101, Albany, New York, 12203 **BY OR BEFORE JUNE 1, 2010.**

- _____ Keep for your files or discard the Petitioner's Check List and the Cover Letter from the Regent for Certification Maintenance.

**Academy of Certified Archivists
Application Form for Certification Maintenance 2010**

Please Mail to: The Academy of Certified Archivists
1450 Western Avenue, Suite 101, Albany, New York 12203

DEADLINE: JUNE 1, 2010

Last Name	First	Initial	Title	Institution
Preferred Mailing Address		(<input type="checkbox"/> home <input type="checkbox"/> work)		City
				State
				Zip
Phone		Fax		Email
PART I				
Please select <u>one</u> option:				
<input type="checkbox"/> Petition: Complete the form, and return to above address by <i>June 1, 2010</i> . For your convenience, a check list of items to return is attached; please make sure all items are completed and returned.				
<input type="checkbox"/> Examination: The 2010 Examination will be held on August 11, 2010. Return form by <i>May 15, 2010</i> . Indicate which site you would like to take the test, and return <u>only</u> this first page.				
<input type="checkbox"/> Washington, DC (SAA Meeting) <input type="checkbox"/> Ann Arbor, MI <input type="checkbox"/> Albuquerque, NM <input type="checkbox"/> San Diego, CA <input type="checkbox"/> Tallahassee, FL or				
<input type="checkbox"/> Pick Your Site* _____ (one site above MUST be selected as well)				
* -- <i>If 5 or more eligible candidates request the examination be given at a site other than those listed above, ACA will administer the exam at the additional location.</i>				
PART II - For Petitioners Only				
Summary - Use to record the total points from Sections A, B, C, D and E.				
Credits Claimed from Section A		_____ (Maximum allowed: 40)		
Credits Claimed from Section B		_____ (Maximum allowed: 60)		
Credits Claimed from Section C		_____ (Maximum allowed: 45)		
Credits Claimed from Section D		_____ (Maximum allowed: 30)		
Credits Claimed from Section E		_____ (Maximum allowed: 30)		
TOTAL CLAIMED		_____ (Minimum required: 100)		

Instructions

The petition process has been designed to allow easy adaptation into any word processing program. This makes it necessary to complete two sections: a detailed descriptive section, and a credit form. Be sure to place your name on each page of your petition.

- Section 1. Create a credit form and list the totals claimed in the appropriate place. Add your totals carefully and transfer to the summary form. Please **DO NOT** write details on this form.
- Section 2. Create your petition by following the outline format of the credit form. You must supply details for each section. Spell out any acronyms for organizations the first time they appear. Please provide a brief description for workshops, seminars and other meetings where the archival component may not be clear by the title. Use format on pages Pet-6 - Pet-7 for the format in which this information is to be presented.

Credits claimed should have been accrued during the five-year period from **1/1/2004 to 12/31/2008**

SECTION A: QUALIFYING PROFESSIONAL EMPLOYMENT (Maximum credits allowed: 40)

- 1. Full-time professional archival employment (8 credits per year worked)
(Full-time employment is considered 35 hours/week for 50 weeks/yr
for a minimum 1750 hours/yr*) _____
- 2. Part-time professional archival employment (pro-rate on basis of 8 credits/yr*) _____
- 3. Employment with partial archival responsibilities (pro-rate on basis of 8 credits/yr*) _____
- 4. Full-time archival consulting (8 credits/yr) _____
- 5. Part-time archival consulting (pro-rate on basis of 8 credits/yr) _____

Section A: TOTAL CREDITS CLAIMED

*See “**Definitions and Special Instructions**” Section A, at www.certifiedarchivists.org

SECTION B: EDUCATION (Maximum credits allowed 60)

- 1. Course taken in any of the archival domains* :
(Equivalent to university semester (3 hr) or quarter (4 hr) courses.
Includes intensive courses of 2 weeks or more.) **20 credits** _____
- 2. Graduate degree (M.A., PhD) earned (in any discipline) during the time period.
(credits earned are in addition to archival course credits above.) **10 credits** _____
- 3. Attendance at archival seminars, workshops, institutes, as follows:
 - a. Program of 3 days or more (but less than 2 weeks) **15 credits** _____
 - b. Program of 2 days **10 credits** _____
 - c. Program of 1 day **5 credits** _____
 - d. Program of less than 1 day **2 credits** _____

*See “**Definitions and Special Instructions**” Section B, at www.certifiedarchivists.org

(section continued on following page)

Name: _____

SECTION B: EDUCATION (*continued*)

(Maximum credits allowed 60)

4. Attendance at professional **archival** meetings* (per meeting):
- a. Attendance for 3 days or more (not including travel or tours) **9 credits** _____
 - b. Attendance for 2 days (not including travel or tours) **6 credits** _____
 - c. Attendance for 1 day (not including travel or tours) **3 credits** _____
 - d. Attendance for less than 1 day but at least 4 hours (not including travel or tours) **2 credits** _____
 - e. Attendance at monthly, semi-monthly or quarterly meetings of local archival groups that have a professional archival program component of approximately one hour **2 credits** _____
(No more than 30 points or one-half of the total points allowed under Section B can be earned under Section B.4.e)

Section B: **TOTAL CREDITS CLAIMED** _____

*See “**Definitions and Special Instructions**” Section B, at www.certifiedarchivists.org

SECTION C: PROFESSIONAL PARTICIPATION AND OUTREACH (Maximum credits allowed 45)

1. Program participation* must be **on archival subjects** (per program session):
- a. Professional paper or presentation **10 credits** _____
 - b. Panelist for session **5 credits** _____
 - c. Chair/Commentator for session **6 credits** _____
2. Institute, workshop, or seminar **leader** (per program) on **archival theory, methods or practice**. If a workshop, etc., is co-taught, both leaders claim equal credit.
- a. Leadership for 5 or more days **15 credits** _____
 - b. Leadership for less than 5 days **10 credits** _____
3. Teaching a semester course* in an accredited college or university on topics **in the archival domains:** **3 credits per semester hour** _____
(pro-rate for quarter system)
4. Programs or presentations **on archival subjects** to any audience given outside working hours not as part of official or assigned job duties* (credits per program, presentation or session):
- a. 1/2 day or less **3 credits** _____
 - b. Over 1/2 day **6 credits** _____

Section C: **TOTAL CREDITS CLAIMED** _____

*See “**Definitions and Special Instructions**” Section C, at www.certifiedarchivists.org

Name: _____

SECTION D: PROFESSIONAL SERVICE

(Maximum credits allowed: 30)

- | | | |
|---|---|-------|
| 1. Leadership of archival organization (per year of activity)* : | | |
| a. Executive officer | 10 credits | _____ |
| b. Member of Council or Steering Committee | 8 credits | _____ |
| c. Chair of committee, task force, section or roundtable | 6 credits | _____ |
| d. Liaison/representative | 4 credits | _____ |
| e. Member of committee or task force | 3 credits | _____ |
| 2. Membership in professional archival organization(s) per year* 1 credit per year | | _____ |
| | (maximum of 5 credits per year only) | |
| 3. Contributed Service* : | | |
| a. Pro-bono consulting (per project per year) | 4 credits | _____ |
| b. Advisory board services (per board per year) | 4 credits | _____ |
| c. Other (please be specific, include length of service) | 2 credits | _____ |

Section D: **TOTAL CREDITS CLAIMED** _____

*See “**Definitions and Special Instructions**” Section D, at www.certifiedarchivists.org

SECTION E: WRITING, PUBLISHING, EDITING

(Maximum credits allowed: 30)

Co-authors or co-editors claim equal credits as single authors and editors.

- | | | |
|--|-------------------|-------|
| 1. Peer Reviewed Publications | | |
| a. On topics in the archival domain: | | |
| i. Book length publication | 30 credits | _____ |
| ii. Journal article, chapter in book | 15 credits | _____ |
| b. On topics related to but not in the archival domain: | | |
| i. Book length publication (e.g., a state or local history) | 6 credits | _____ |
| ii. Journal article, chapter in book | 3 credits | _____ |
| 2. Publications without Peer Review* | | |
| a. On topics in the archival domain: | | |
| i. Book length publication | 15 credits | _____ |
| ii. Journal article, chapter in book | 10 credits | _____ |

(section continued on following page)

Name: _____

SECTION E: WRITING, PUBLISHING, EDITING *(continued)* (Maximum credits allowed: 30)

2. Publications without Peer Review* *(continued)*

- a. iii. Newsletter article (350 words or more) **5 credits** _____
- iv. Published book review **3 credits** _____
- b. On topics **related to** but not in the archival domain (history, biography, or other topics in which reference to archives or archival papers is primary):
 - i. Book length publication **5 credits** _____
 - ii. Journal article, chapter in book **3 credits** _____
 - iii. Newsletter article (350 words or more) **2 credits** _____

3. Editorial activities*

- a. General editor of professional **archival** journal **25 credits** _____
(per year of activity)
- b. Editor of book length **archival** publication or manual **20 credits** _____
(per publication)
- c. Editor of **archival** newsletter **15 credits** _____
(per year of activity)
- d. Departmental editor (e.g., editor of Review section of journal) **10 credits** _____
- e. Editor, web page for an archives or archival organization **5 credits** _____
(per web site)

Section E: **TOTAL CREDITS CLAIMED**

*See "**Definitions and Special Instructions**" Section E, at www.certifiedarchivists.org

TOTAL CREDITS CLAIMED FOR PETITION: _____

**QUALIFYING ARCHIVAL EXPERIENCE
FORMAT INSTRUCTIONS FOR PROVIDING DETAILED INFORMATION**

Note: This document is available as an editable Word document on the ACA web site (www.certifiedarchivists.org). Please provide details of activities for all the credits you have claimed for each section. **Please put your name on each page. It is not necessary to send in any copies of documentation.** Please format exactly as laid out below, giving the Section letter and Item number for each block of information as indicated. You will need to edit the spacing on this template as necessary to fit your detailed qualifying archival experience. Feel free to delete items that do not apply to your petition.

Section A: Qualifying Professional Employment

Item A.1 - 5

- Job/Project Title and BRIEF Description of Work
- Institution/Employer; Employer's Address, Phone
- Dates of employment; if part time, hours per week
- If partial archival responsibilities, give estimate of % of time

Section B: Education

Item B.1

Course Title (s)	Institution/Location	Date(s)	# of Credits
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Item B.2

Degree/Discipline	Institution/Location	Date of Degree	# of Credits
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Item B.3.a-d

Title	Institution/Location	Date(s)/Length of Time	# of Credits
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Item B.4.a-e

Name of Organization	Location	Date(s)/Length of Time	# of Credits
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Section C: Professional Participation and Outreach

Item C.1.a

Paper Title & topic	Program, conference, etc.	Organization	Date	# of Credits
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Item C.1.b

Session Title & topic	Program, conference, etc.	Organization	Date	# of Credits
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Item C.1.c

Session Title & topic	Program, conference, etc.	Organization	Date	# of Credits
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Name _____

Item C.2.a-b

Program Title & topic Institution/conference Location Date(s) # of Credits

Item C.3

Course, topic(s) Institution, location # of Course Credits Dates # of Credits

Item C.4.a-b

Program Title/topic Institution/organization Location Date(s) # of Credits

Section D: Professional Service

Item D.1.a.

Officer Title Organization Dates # of Credits

Item D.1.b.

Council, Committee Name Organization Dates # of Credits

Item D.1.c-e

Title Name of Committee, etc. Organization Dates # of Credits

Item D.2.

Name of Organization Dates of membership # of Credits

Item D.3.a

Name of Project Description Organization Dates # of Credits

Item D.3.b

Name of Board Description Organization Dates # of Credits

Item D.3.c

Nature of Activity Dates of Service # of Credits

Section E: Writing, Publishing, Editing

Peer Reviewed Publications

Item E.1.a.i

Date of Publication Book Title and Subtitle Publisher's Name # of Credits

(If topic of publication is not clear, give succinct one-sentence description.)

Name _____

Item E.1.a.ii

Date of Publication Title of article Title of Journal Volume, No. # of Credits

or

Date of Publication Chapter Title Book Title & Author Publisher # of Credits

(If topic of publication is not clear, give succinct one-sentence description.)

Item E.1.b.i

Date of Publication Book Title and Subtitle Publisher # of Credits

(If topic of publication is not clear, give succinct one-sentence description.)

Item E.1.b.ii

Date of Publication Title of article Title of Journal Volume, No. # of Credits

or

Date of Publication Chapter Title Book Title & Author Publisher # of Credits

(If topic of publication is not clear, give succinct one-sentence description.)

Publications without Peer Review

Item E.2.a.i

Date of Publication Book Title and Subtitle Publisher's Name # of Credits

(If topic of publication is not clear, give succinct one-sentence description.)

Item E.2.a.ii

Date of Publication Title of article Title of Journal Volume, No. # of Credits

or

Date of Publication Chapter Title Book Title & Author Publisher # of Credits

(If topic of publication is not clear, give succinct one-sentence description.)

Name _____

Item E.2.a.iii

Title of Article _____ Name of Newsletter _____ Date _____ # of Credits _____

Item E.2.a.iv.

Title, Author and Date of Book reviewed _____ Name of Journal, etc. _____ Date _____ # of Credits _____

Item E.2.b.i

Date of Publication _____ Book Title and Subtitle _____ Publisher _____ # of Credits _____

(If topic of publication is not clear, give succinct one-sentence description.)

Item E.2.b.ii

Date of Publication _____ Title of article _____ Title of Journal _____ Volume, No. _____ # of Credits _____

or

Date of Publication _____ Chapter Title _____ Book Title & Author _____ Publisher _____ # of Credits _____

(If topic of publication is not clear, give succinct one-sentence description.)

Item E.2.b.iii

Title of Article _____ Name of Newsletter _____ Date _____ # of Credits _____

Editorial Activities

Item E.3.a

Full Name of Journal _____ Dates _____ # of Credits _____

Item E.3.b

Date of Publication _____ Book Title and Subtitle _____ Publisher _____ # of Credits _____

Item E.3.c

Full Name of Newsletter _____ Organization _____ Location _____ Dates _____ # of Credits _____

Item E.3.d

Web page address _____ Name of organization _____ Dates _____ # of Credits _____

**PETITION FOR RECERTIFICATION
DECLARATION**

_____, a Certified Archivist who resides at:
(Name of Declarant Certified Archivist)

(Street) (City) (State)

under penalty of perjury states:

1. I hereby petition that I be granted certification maintenance as a "Certified Archivist" by The Academy of Certified Archivists (ACA) based upon the combination of employment, education, professional participation, professional service, and writing, publishing and editing indicated on the attached Application and Credit Forms.
2. I affirm that the information contained on the attached Application, Credit Forms, and supporting data is true and accurate.
3. I understand that the failure to provide relevant, true and accurate information in support of this petition will be grounds for denying or withdrawing certification.
4. I give permission for ACA (and its subcommittees or ACA Certification Maintenance Board) to consult with present and previous employers, with educational institutions, and other organizations listed herein for the sole purpose of verifying accuracy and completeness of information presented.
5. I release, hold harmless, and agree to indemnify ACA, its directors, officers, employees and agents, and each of them to the fullest extent authorized under law, from or for any claims, causes of action, losses, costs, damages or expenses of whatever kind, including counsel fees, arising out of or relating in any way to ACA's decision making and information gathering processes in connection with this petition, and ACA's ultimate action on this petition.
6. I agree to follow guidelines of professional conduct established by ACA and the then current Code of Ethics of the Society of American Archivists to the best of my ability. I understand that failure to follow these ethical standards may result in the withdrawal of certification.
7. I understand the certification maintenance requires an annual dues payment of \$50.00, and that certification maintenance is for a period of five years.
8. If my certification expires or is removed by due action of ACA, I will be bound by that decision and will no longer use the title Certified Archivist.

Under penalty of perjury, on this _____ I certify that the statements made in this declaration are true.
(Date)

Signature of Declarant