



Jack A Proctor Virginia Building Code Academy
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Continuing Education (CE) Application for Certified Code Officials and Technical Assistants

Directions:

1. Make sure your VBCA Online Registration System profile is current:
<https://dmz1.dhcd.virginia.gov/BFR/Main/LogOn.aspx>
2. Complete parts 1 - 3 of this application.
3. Send this application to us - **along with your supporting documents for each event listed** - at the address/email address above

Important notes:

- Mandatory code change training (CCT) cannot count towards DHCD CE hours
- Failure to submit a complete and accurate application may result in delays or denial of your application.
- All statements and documentation provided are subject to verification.

Part 1: Applicant Information (please type or print)

Full Name:	
Driver's License Number:	
Home Address:	
Current Employer:	<input type="checkbox"/> Government <input type="checkbox"/> Non-Government
Position/Title:	Date of Appointment:
Work Phone:	Cell Phone:
E-mail:	

Part 2: Fill out the Continuing Education Record (see page 2)

Part 3: Required Signature

Applicant:

I attest that all information provided by me on this application is true and accurate to the best of my knowledge. I understand that falsification of any part of this application may result in denial of active certification status.

Applicant's Signature _____

Date: _____

Part 2: Continuing Education Hours Credit Record

Applicant Name: _____ **Requirement Period: May 1, 20** _____

Education Provider of Program:		
Title of Program:		
Subject or Content:		
Date(s) of Program:		
Total # of Contact Hours:		
Documentation Attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type of documentation attached:
<i>Office use only:</i>		<i>Credit Hours:</i>
Education Provider of Program:		
Title of Program:		
Subject or Content:		
Date(s) of Program:		
Total # of Contact Hours:		
Documentation Attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type of documentation attached:
<i>Office use only:</i>		<i>Credit Hours:</i>
Education Provider of Program:		
Title of Program:		
Subject or Content:		
Date(s) of Program:		
Total # of Contact Hours:		
Documentation Attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type of documentation attached:
<i>Office use only:</i>		<i>Credit Hours:</i>
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Total # of Contact Hours:		
Documentation Attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type of documentation attached:
<i>Office use only:</i>		<i>Credit Hours:</i>
Education Provider of Program:		
Title of Program:		
Subject or Content:		
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Documentation Attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type of documentation attached:
<i>Office use only:</i>		<i>Credit Hours:</i>