



CEC Petition Application

NETA Applicant Information

Name: _____

Customer #: _____

Address: _____

Certification Expiration Date _____

Course Information

Title of Course(s) Being Petitioned for NETA Credits	Organization/Instructor	# of Contact Hours

Please Enclose:

Check or Money Order in the amount of \$15 payable to NETA (for each course being petitioned)
Certificate or course completion of transcript

Please Note:

All coursework must be completed within your current two-year certification period.
All coursework must be directly related to health and / or fitness.
This application will not be process without all the required information.
The \$15 administrative fee (per course) is non-refundable and does not guarantee that credits will be awarded.
Please make checks payable to NETA.

Number of courses being petitioned: _____ Total \$ Enclosed: _____ Check# _____

Visa/Mastercard or Discover # _____ CVC# _____ Exp Date: _____
On back of card

Cardholder Signature _____

I understand that the \$15 administrative fee (per course) is non-refundable and does not guarantee that credits will be awarded.

Applicant Signature: _____ Date: _____

Mail To:

NETA, 5955 Golden Valley Road, Suite 240, Minneapolis, MN 55422
Phone: 1-800-237-6242 or 763-545-2505 • Fax: 763-545-2524