

Maine Technical Assistance Credential

Application for Renewal

"The credential will be awarded for three years, with renewal based on documentation of a threecredit college course OR 45 hours of training covering a topic related to mentoring, coaching, peer-to-peer network facilitation, or consultation. Subsequent renewals will be required every five years with the same criteria."

Name (please print clearly):	
Address:	
Email:	Phone:
Date of Birth:	Check one: 🗌 Initial renewal (3 years) 🗌 5 year renewal
Select:	
	npleted a 3-credit college course pertaining to mentoring, r network facilitation, or consultation.
Course number:	Name of course:
I have completed 45 cc peer network facilitatic	ntact hours of training related to mentoring, coaching, peer-to- on, or consultation.
Documentation:	
I am including docume training hours)	ntation (college transcript or certificates/documentation of
My documentation has	already been submitted to the MRTQ Registry.
	n fee for renewal. Please make check payable to the ne and mail to the address below.
Signature	Date
Please email renewal materi	als to <u>mrtq.contact@maine.edu</u> or mail to:
Maine Roads to Quality Profe Catherine Cutler Institute/US PO Box 9300, 34 Bedford Str Portland, ME 04104	



Office of Child & Family Services, Maine Department of Health & Human Services