

First Credential Renewal Attestation

To the Certification Commission for Healthcare Interpreters (CCHI):

This letter is to attest that I have completed and submitted the renewal application for my first CCHI certification credential. To find all applicable documentation of continuing education (CE), refer to the first application for which I provide the details below.

I understand that the renewal application for the first credential must be approved by CCHI before the renewal application for my second credential is approved.

I understand that if my renewal application for the first credential is rejected, the renewal application for the second credential is rejected, too.

I understand that if I choose to renew the second credential only, I must upload all CE documentation to the second credential renewal application *instead of* this Attestation letter.

Date of Attestation: _____

Information about Certificant:

First name:	
Middle name:	
Last name:	
First credential name:	
Date of award of first credential:	
CCHI ID # for first credential (can be found on the certificate):	
Second credential name:	
Date of award of second credential:	

NOTE: Review CCHI Certification Renewal requirements at <https://cchicertification.org/renew-certification/renewal-process/>. If you have any questions about this Attestation, please contact us at renewal@cchicertification.org.