**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.