CPP Recertification Application Checklist

Applicant Name: _____ **Previous CPP #:** _____ **DOB** (m/d): _____

Mailing Address: _____

City: _____ **County:** _____ **State:** _____ **Zip:** _____

Phone: _____ ☐ Cell ☐ Home ☐ Office **Phone:** _____ **Ext:** _____

Required Documents to Upload to Personal Folder on Google Drive

☐ CPP Recertification Application Form
☐ CPP Recertification Application Checklist
☐ Current WA Driver's License and Proof of Employment
☐ CPP Recertification Fee Online Payment Receipt ($175)

Prevention Education Continuing Education Hours (CEHs) Minimum Requirements (60 hours)

☐ Drug Pharmacology and/or Harm Reduction Education (5 hours)
☐ Prevention-Specific Ethics Education (6 hours)
☐ Substance Use Prevention Education (22 hours)
☐ General Prevention Education (22 hours)
☐ General Prevention Education – Equity (5 hours)
☐ Completed CPP Renewal Record of CEHs Completion Form and submission of all attendance verification documentation.

Code of Ethical Conduct for Prevention Professionals

☐ Code of Ethical Conduct for Prevention Professionals document to indicate agreement and commitment to the principles of the Code, signed and dated.

Current Criminal History Background Check

☐ Enclosed results of Criminal History Background Check (Completed within one year prior to the application date.)

Submission of Completed CPP Recertification Application

☐ Sends email notification to PSCBW that all uploads of required documents are completed to smgpscbw@gmail.com. This notification will initiate the PSCBW review of all submitted documents.

I attest that I have completed all required CPP recertification continuing education hours. All required documents have been uploaded to my personal folder on the PSCBW Google Drive for submission and review.

_____   _____
Applicant Signature   **Date Signed**

Updated 2/19/2025.