



SpaceTEC® Work Verification Form for Recertification

To request recertification, please complete and submit this form to SpaceTEC.

Section A should be completed by the person requesting recertification.

Section B should be completed by the person validating work verification (i.e., Supervisor, Manager, or Human Resources Representative).

Information on how to submit form and payment is located in **Section C**.

****All fields must be completed for Recertification request to be processed****

Section A

Date of this submission:

First Name:

Last Name:

Address:

Personal Phone Number:

Business Phone Number:

Personal (home) E-mail Address:

Company/Organization:

Job Title:

List Certifications to Recertify:

Section B

The following section to be completed by person providing work verification
(Supervisor, Manager, or Human Resource Representative)

First Name

Last Name:

Company/Organization:

Job Title:

Business Phone Number:

E-mail Address:

By signing the box below, you are certifying that the above named person has worked at least 12 of the prior 36 months in the field in which they are requesting recertification.

Section C

Cost: **\$10 for electronic version of certificate sent by email**
 \$25 for hard copy of certificate and/or ID card sent by mail

Completed form and check payment can be submitted to:

SpaceTEC Partners, Inc.
7099 N. Atlantic Ave.
Suite 300
Cape Canaveral, FL. 32920

If paying through PayPal: Scan and email form to info@spacetec.org.

PayPal payments can be made at:

<http://www.spacetec.us/spacetec-recertification-payment-form>

Any questions, please contact SpaceTEC staff at (321)730-1020

The following section to be completed by SpaceTEC staff.

Date form received:

Form verified by:

Date record updated:

Record updated by: