

## CRN-BC™ Initial Certification by Portfolio and Certification Renewal

### Application Check List

This checklist may be used to ensure all required documents are included with your certification application submission. Detailed instructions can be found in the Candidate Handbook and at CRNCC.org. Please follow instructions exactly as stated; incomplete submissions or failure to follow instructions may delay your review or result in failure to meet criteria for CRN-BC™ certification. Incomplete applications may incur a \$20 administrative fee. Please save the completed documents listed below in a file using the naming conventions that follows each:

☐ **Application:** Use the following naming convention, substitute your name and insert the submission deadline month either 04, 09 or 10 and year (20XX).

Example:

04.2025\_1.App\_LastName.FirstName,

09.2025\_1.App\_LastName.FirstName (certification renewal only)

10.2025\_1.App\_LastName.FirstName

**Note:** *The first six digits are the deadline months April (04), September (09) or October (10) and year. Please use the deadline review date for which you are submitting.*

☐ **Continuing Education Record:** Use the following naming convention

04.2025\_2.CE\_LastName.FirstName

09.2025\_2.CE\_LastName.FirstName (certification renewal only)

10.2025\_2.CE\_LastName.FirstName

☐ **Continuing Education Certificates:** Use the following naming convention

04.2025\_2.CEcerts\_LastName.FirstName

09.2025\_2.CEcerts\_LastName.FirstName (certification renewal only)

10.2025\_2.CEcerts\_LastName.FirstName

☐ **Professional Activities Record:** Use the following naming convention

04.2025\_3.PA\_ LastName.FirstName

09.2025\_3.PA\_ LastName.FirstName (renew certification only)

10.2025\_3.PA\_ LastName.FirstName

**If applicable include:**

☐ **Preceptor Form:** Use the following naming convention

04.2025\_3.Precept\_ LastName.FirstName

09.2025\_3.Precept\_ LastName.FirstName (certification renewal only)

10.2025\_3.Precept\_ LastName.FirstName

☐ **Mentor Form:** (see Forms) Use the following naming convention

04.2025\_3.Mentor\_ LastName.FirstName

09.2025\_3.Mentor\_ LastName.FirstName (certification renewal only)

10.2025\_3.Mentor\_ LastName.FirstName

☐ **Resume:** (Initial Certification Only) Follow the resume template in the Candidate Handbook **exactly** as formatted. Use the following naming convention:

04.2025\_4.R\_ LastName.FirstName

10.2025\_4.R\_ LastName.FirstName

☐ **Exemplar:** (Initial Certification Only) (see instructions in the candidate handbook) Use the following naming convention:

04.2025\_5.EX\_ LastName.FirstName

10.2025\_5.EX\_ LastName.FirstName

**Go to [CRNCC.org](https://www.crncc.org) to submit your application; upload documents and submit fee.**

**See website for application schedules and fees. *All fees are non-refundable and non transferable.***