



CERTIFIED CONNECTICUT MUNICIPAL
COLLECTORS' COMMITTEE

John Rainaldi, CCMC, CCMA II, Manchester
Lisa A. Biagiarelli, CCMC, Norwalk
David Kluczowski, CCMC, Fairfield
Lisa Madden, CCMC, Somers
Beth Hamel, CCMC, Harwinton
Launa Goslee, CCMC, Torrington
Jennifer L. Gauthier, CCMA II, OPM

Request for course/workshop approval for CCMC Recertification hours

Name of person making the request: _____

Email address of requestor: _____

Course/Workshop title: _____

Date(s) offered: _____

Location or format of course/workshop _____
(If the course/workshop was offered remotely, please indicate the format)

Total # of hours of course/workshop: _____

of hours requested for CCMC recertification credit: _____

Name of sponsoring organization: _____

Name of instructor(s): _____

Please provide the following information with your submission: 1) Information about the course/workshop, such as a syllabus, PowerPoint, instructor bio, or course announcement, etc.; 2) Certificate of Completion (if you have completed the workshop), 3) information about how this workshop directly relates to work in Tax Collector's Office.

Please email your completed request form and additional attachments to: ccmchair@gmail.com

By submitting this request, you certify that you have or will meet all requirements for attendance for the requested course/workshop, and that you have or will attend the complete course/workshop. The CCMC Committee has final authority to approve or disapprove all courses or workshops. Any incomplete requests, or requests that do not include sufficient additional information will not be approved. Your request will be considered at the next applicable CCMC Committee meeting, which may not be for several weeks.

Signature of requestor

Date of request