



# AI Professional Association CAIE Renewal Form

## Applicant Information

Full Name: \_\_\_\_\_ Application Date: \_\_\_\_\_

Address: \_\_\_\_\_  
*Block Street Address*

\_\_\_\_\_ *Apartment/Unit #* *Postal Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## CAIE Information

CAIE Level: \_\_\_\_\_ Certification Number: \_\_\_\_\_ Date Attained: \_\_\_\_\_

## Employment Information

Current Role / Position: \_\_\_\_\_

Current Company / Organization: \_\_\_\_\_

## CPD Record

Total CPD Hours Recorded \_\_\_\_\_

(CPD: Continuous Professional Development)

*Please provide the record details in the next few sections.*







**Declare CPD Compliance**

Reminder Note:

CAIE Level 1 renewal Requirement	<ul style="list-style-type: none"><li>• Logged at least 75 CPD hours</li></ul>
CAIE Level 2 renewal Requirement	<ul style="list-style-type: none"><li>• Technical Report for AI Project</li><li>• Logged at least 100 CPD hours</li><li>• Logged at least 25 CPD hours for Project Management / Leadership Courses</li></ul>

Did you meet the minimum CPD requirement?      YES      NO  
                                            Total CPD Hours : \_\_\_\_\_

*Please submit the necessary verifiable documentation and CPD Record Form with this application.*

**Disclaimer and Signature**

*I certify that my inputs are true and complete to the best of my knowledge.  
If application is approved, I understand that false or misleading information may result in certification revoked.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_