



North Carolina Association of Municipal Clerks
in partnership with
University of North Carolina at Chapel Hill School of Government
& North Carolina League of Municipalities

Select one:

☐ Initial Certification
☐ Recertification

**APPLICATION FOR CERTIFICATION & RECERTIFICATION DESIGNATION
FOR NORTH CAROLINA CERTIFIED MUNICIPAL CLERK (NCCMC) PROGRAM
SUBMISSION DEADLINE: **March 31, 2026****

Date: ____/____/____ Email Address: _____

Personal Information (List as you want it to appear on the Certificate)

Name: _____

Title / Position: _____ Governmental Unit: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____ Telephone: _____

Others (i.e. local government officials, media, etc.) to receive a notification email announcing your certification status:

Name: _____ Name: _____

Title: _____ Title: _____

Email: _____ Email: _____

Check each applicable space below and include supporting documentation as indicated.

BOTH OF THE FOLLOWING MUST APPLY:

☐ I am currently a full-time sworn municipal clerk or full-time sworn deputy clerk; **AND**

☐ I am currently a member of NCAMC and have been for a **minimum of two (2) years.**

Date you became member of NCAMC: _____

AT LEAST ONE (1) OF THE FOLLOWING MUST APPLY (submit copy of certificate for selected category):

Select one:

☐ I have successfully completed the UNC School of Government course: _____ Clerks Certification Institute
OR _____ Municipal & County Administration

☐ I have a minimum of three (3) years' experience as a full-time municipal or deputy clerk, and will need to take the NCCMC Examination. All examination applicants are provided two (2) opportunities to take the exam per year (passing score is 80), or a new application & fee will be required.
OR

☐ I have previously received the Certified Municipal Clerk or Master Municipal Clerk designation from the International Institute of Municipal Clerks (IIMC).

☐ **FOR INITIAL CERTIFICATION:** Included with this application is a copy of the \$75 non-refundable application fee (or receipt) that has been:
_____ Directly mailed to NCLM at NCAMC c/o NCLM Treasurer, 434 Fayetteville St., Suite 1900, Raleigh, NC 27601; **OR**
_____ Paid online

☐ I hereby apply for my initial N.C. Certified Municipal Clerk designation with the NCAMC. I acknowledge that continuous NCAMC membership and recertification every five (5) years is required to retain the Certified Municipal Clerk designation.
OR

☐ **RECERTIFICATION:** I am applying for recertification and have completed pages one and two of this application.

Signature: _____ **Date:** ____/____/____

Submission Process: 1) Gather all continuing education materials [transcripts, certificates, etc.] 2) Complete all of the application 3) Submit processing payment [mail or online] 4) Submit completed application, all supporting materials, and proof of payment [electronic receipt or copy of check] to NCAMCCertification@gmail.com



Page 2: Recertification

The North Carolina Certified Municipal Clerk Designation term is five (5) years and can be maintained through the following: (Certification term begins July 1 - June 30 of Year Five)

- Continuous NCAMC membership.
- 30 or more hours of continuing education and participation.
- Annual recertification application deadline is March 31.

It is every clerk's responsibility to maintain membership and continuing education records and track certification renewal requirements.

**List all continuing education and participation hours accumulated since your last certification:
(supporting documentation must be included with this application or hours will not be counted.)**

	Total Hours
Master Clerk Academies (dates attended / hours):	_____
Regional Clerk Academies (dates attended / hours):	_____
Other School of Government / League or work-related courses (course name, dates attended / hours):	_____
Other IIMC courses not sponsored by School of Government (course name, dates attended / hours):	_____
NCAMC Regional Meeting Host (1 hour per year served):	_____
NCAMC Executive Board (2 hour per year served); NCAMC Committee Chair (2 hours per year served); NCAMC Committee Member (1 hour per year served): committee / service date:	_____
TOTAL HOURS (30 or more minimum)	_____

FOR RECERTIFICATION: Included with this application is a copy of the \$75 non-refundable application fee (or receipt) that has been:

_____ Directly mailed to NCLM at NCAMC c/o NCLM Treasurer, 434 Fayetteville St., Suite 1900, Raleigh, NC 27601; **OR**
_____ Paid online

I hereby reapply for the N.C. Certified Municipal Clerk designation with the NCAMC. I acknowledge that continuous NCAMC membership and recertification every five (5) years is required to retain the Certified Municipal Clerk designation.

Signature: _____ **Date:** _____/_____/_____

Submission Process: 1) Gather all continuing education materials [transcripts, certificates, etc.] 2) Complete all of the application 3) Submit processing payment [mail or online] 4) Submit completed application, all supporting materials, and proof of payment [electronic receipt or copy of check] to NCAMCCertification@gmail.com