



**BUSINESS RETENTION AND  
EXPANSION INTERNATIONAL**  
**Application for BR&E Professional Recertification**

Name \_\_\_\_\_

Title/Position \_\_\_\_\_

Company/Organization \_\_\_\_\_

Address \_\_\_\_\_

State/Province \_\_\_\_\_ Country \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ FAX \_\_\_\_\_ E-mail \_\_\_\_\_

Initial BRE Professional Certification or last Recertification Date \_\_\_\_\_

**BRE Professional** is the advanced level of certification for Business Retention and Expansion International. It is awarded to those who have completed a rigorous set of education requirements, demonstrated dedication to the profession and participated in the maintenance and growth of the BREI organization through service.

**Continuing Education**

*(All must be taken within three (3) years of the application submission date)*

**Option 1:** Take/develop eight (8) hours (web-based) or sixteen (16) hours (face-to-face) of BREI Sponsored Continuing Education Courses

**Option 2:** Take/develop four (4) hours (web-based) or eight (8) hours (face-to-face) of BREI Sponsored Continuing Education Courses plus successfully complete sixteen (16) hours of approved non-BREI courses (BREI Education Committee approval required; a certificate of completion/transcript plus a course agenda/syllabus is required for each non-BREI course taken)

## BREI Sponsored Continuing Education Courses

Course Title: _____
Date: _____ Location: _____
Course Title: _____
Date: _____ Location: _____
Course Title: _____
Date: _____ Location: _____
Course Title: _____
Date: _____ Location: _____

## Non-BREI Sponsored Courses

Course Title: _____
Sponsoring Organization: _____
Date(s) of Training: _____ Course Hours: _____
Course Title: _____
Sponsoring Organization: _____
Date(s) of Training: _____ Course Hours: _____
Course Title: _____
Sponsoring Organization: _____
Date(s) of Training: _____ Course Hours: _____
Course Title: _____
Sponsoring Organization: _____
Date(s) of Training: _____ Course Hours: _____
Course Title: _____
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Date(s) of Training: _____	Course Hours: _____
Course Title: _____	Sponsoring Organization: _____
Date(s) of Training: _____	Course Hours: _____

### **Business Retention & Expansion Program Participation (required)**

Provide leadership for at least one (1) BR&E Program within three (3) years of the application submission date.

Date: \_\_\_\_\_ Location: \_\_\_\_\_  
 Role: \_\_\_\_\_

### **BREI Organizational Involvement**

***Six (6) required in addition to BREI conference attendance***

***All must occur within three (3) years of the application submission date***

Attend BREI Annual Conference (Two (2) required and up to three (3) recognized)

Date: \_\_\_\_\_ Location: \_\_\_\_\_  
 Date: \_\_\_\_\_ Location: \_\_\_\_\_  
 Date: \_\_\_\_\_ Location: \_\_\_\_\_

Serve as a BREI board member, officer, committee chair, active committee member or state/provincial chair

Activity: \_\_\_\_\_  
 Dates: \_\_\_\_\_

Attend Other Recognized Conference (*subject to approval by the Education Committee; up to two (2) recognized*)

Conference Name: \_\_\_\_\_

Host Organization: \_\_\_\_\_

Location: \_\_\_\_\_ Date: \_\_\_\_\_

Conference Name: \_\_\_\_\_

Host Organization: \_\_\_\_\_

Location: \_\_\_\_\_ Date: \_\_\_\_\_

Write and publish an article on Business Retention and Expansion (*provide a copy of the article*)

Title: \_\_\_\_\_

Media Title/Location: \_\_\_\_\_ Date: \_\_\_\_\_

Teach the BREI Fundamentals Course or a BREI Continuing Education Course

Location: \_\_\_\_\_ Date: \_\_\_\_\_

Host the BREI Annual Conference, the BREI Fundamentals Course or a BREI Continuing Education Course

Location: \_\_\_\_\_ Date: \_\_\_\_\_

Make a presentation on Business Retention and Expansion at a state, provincial, regional or national conference

Presentation Title: \_\_\_\_\_

Organization/Conference Title: \_\_\_\_\_

Location: \_\_\_\_\_ Date: \_\_\_\_\_

**I certify that I have carried out the above activities and submit them in support of this application. I also understand that I must be a member of BREI in good standing to apply for certification and that I will maintain my BREI membership as a condition of my certification.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_  
**The BRE Professional recertification fee is \$125.00 US; this fee is payable when the application for recertification is approved by the Education Committee.**

Please email the BRE Coordinator recertification form and any supporting documentation to [brei@brei.org](mailto:brei@brei.org). Please indicate in your email that this correspondence should be delivered to the Education Committee.