



Certification Council for Medical Audit Specialists

P.O. Box 47609
San Antonio, TX 78265-8609
(210) 792-2251

CMAS Recertification Application Form

Certified Medical Audit Specialist

Submission Deadline: Must be Postmarked by May 31st or September 30th, depending on the month in which the certification examination was taken.

--	--

Name

CMAS Number

--	--

Address

City

--	--	--	--

State

Zip Code

Phone (Home)

Phone (Work)

Email Address

--	--

Home

Work/Business

--	--

Employer

Position/Title

*****PAYMENT*****

Enclose \$100 recertification fee.

To pay by Credit Card:

Type of Card:	Credit Card #:	Exp Date:
----------------------	-----------------------	------------------

(VISA, M/C, AMEX, DISC)

(Month/Year)

Please complete the following if billing information is different than the contact information above:

Name on card:

Billing Address:

City:	State:	Zip:
--------------	---------------	-------------

Signature:

To pay by check: Make your check payable to AAMAS (if needed, our Tax ID is 65-0573775)



Certification Council for Medical Audit Specialists

P.O. Box 47609
San Antonio, TX 78265-8609
(210) 792-2251

CMAS Continuing Education Tracking Form

NAME (PRINT)	CMAS Number	Original CMAS Certification Year

Signature: _____
This signature attests to accuracy of the information submitted below.

Date of Educational Activity	Mark CMAS Core Curriculum Domain Met				Program Title/Location	Onsite	E-learning	Others* Complete Blank Form	Sponsor	CMAS CEU Hours Earned
	1	2	3	4						
April 24-25, 2008	x	x	x	x	SAMPLE ONLY Program Title: The Wonderful World of Medical Auditing Location: Anaheim, California	x			American Association of Medical Audit Specialists	12.0
Total										

No part of this publication may be reproduced, transmitted, or copied by any means without the written permission of the American Association of Medical Audit Specialists and the Certification Council for Medical Audit Specialists.
Revised October 2009



Certification Council for Medical Audit Specialists

P.O. Box 47609
San Antonio, TX 78265-8609
(210) 792-2251

CMAS Continuing Education Tracking Form Additional Documentation Sheet

Use this page for any additional educational activities you have completed.
