Master Instructor Continuing Education Program

Accreditations for Aviation Educators

MICEP Supporting Document

Properly completed, this document provides an acceptable means for supporting an online MICEP Activity Completion Form (ACF). This document has fillable form fields; it can be handwritten as well (legibly please!). Keep copies with you in case you might want to support Activities when applying for a future MICEP designation.

Upon completion, this document must be made available for upload to your MICEP application. For handwritten versions, this can be accomplished by scanning or taking a photo with a smartphone and sending to your computer. Please follow the file naming conventions provided on the online ACFs when uploading files to your MICEP application.

Applicant Info Block

Name: _____

Activity/Event(s): _____

Date Range: _____   Hours Claimed: _____

Verifier Info Block

Name: _____

Relationship to Applicant: _____

Phone: _____

Email: _____

I hereby verify the claim presented in the Applicant Info Block.

Signature: _____

      For digital signature, please type your name in between forward slashes, e.g., /Your Name/