

**Construction Education Foundation of Georgia (CEFGA)**



**FORM A – Preliminary Application  
For CEFGA Program Accreditation/  
Re-Accreditation**

The construction program administrator and teacher should:

- 1) *read and understand the Guidelines for Training Unit Accreditation/Re-Accreditation*
- 2) *complete this preliminary application form*
- 3) *send this application to CEFGA along with a check for \$1900.00 (made payable to CEFGA) as a deposit for accreditation/re-accreditation expenses.*

Upon receipt of Form A, CEFGA will contact the applicant regarding the status of the application, answer questions about the procedure, and assign an ETL (Evaluation Team Leader) to coordinate the activities of the accreditation/re-accreditation process.

**All Blocks MUST Be Completed**

School System \_\_\_\_\_

School Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Supervisor \_\_\_\_\_  
Name Title

**Please complete information for all training areas for which you are requesting accreditation/  
re-accreditation. (please check appropriate boxes below)**

Initial Accreditation	<input type="checkbox"/> Yes <input type="checkbox"/> No	Reaccreditation	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Training Area	# of Students	# of Instructors	Instructor is Currently NCCER (ICTP) Certified
Construction (Plumbing, Carpentry, Masonry, and Electrical)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Metals (Welding and/or Sheet Metal)			<input type="checkbox"/> Yes <input type="checkbox"/> No
HVACR			<input type="checkbox"/> Yes <input type="checkbox"/> No

Are you currently using the *Contren*® (NCCER) Learning Series curriculum?  Yes  No

Instructor \_\_\_\_\_  
Signature Printed Name & Social Security Number

Email Address \_\_\_\_\_ Date \_\_\_\_\_

Supervisor \_\_\_\_\_  
Signature Printed Name

Email \_\_\_\_\_ Date \_\_\_\_\_

**Please print, sign, and send check to: Construction Education Foundation of Georgia (CEFGA)  
3585 Lawrenceville-Suwanee Road, Suite 301  
Suwanee, GA 30024  
Fax (678) 889-4446**