



Maintaining Your HR Certification

Name _____

Title _____

Organization _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Name of Class Attended _____

Dates Attended: _____

Check one: _____ I have already completed this class. _____ This is an upcoming class that I am enrolled in.
I will re-submit this form upon class completion.

Certification: ☐ THRP I ☐ THRP II ☐ TMP ☐ TAP

Training Provider:

- ☐ Drummond/Woodsum/McGee ☐ NNAHRA Event ☐ Soaring Bird Solutions
☐ Personnel Security Consultants, or, ☐ NNAHRA On-Demand Learning
☐ Other - Please include a course description, course outline and proof of attendance (e.g., certificate)

Please note: Maintaining certification requires 24 hours of approved training within 24 months of re/certification. A two-month grace period is provided. Please submit all certificates, agendas/syllabus with your THRP Maintenance Form at one time.

Please email this form to info@nnahra.org



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