



## HRCI Emeritus Status Application Form

### PURPOSE

A process to help maintain the credentials of an actively certified individual who no longer is/will be practicing in the HR profession. HRCI's Emeritus status allows currently certified HR professionals whose status is "Member Active" to continue to use their designation(s) after they retire from the HR profession without having to recertify again in the future.

**CAUTION-** Please consider the Emeritus Status carefully before you apply and request this change. Once you are awarded the Emeritus Status and later decide to re-enter the HR profession, you will forfeit the Emeritus status and must re-apply and re-take the corresponding qualifying HRCI exam-type to regain the designation(s) you previously had.

Do not complete this application if you are planning to continue doing part-time HR work, perhaps as a consultant or as a lecturer. Doing such is not considered retirement and you cannot be eligible for the Emeritus Status.

### REQUIREMENTS FOR THE EMERITUS STATUS

To be considered, please complete and submit all the required information indicated below to [certdirector@hrci.org](mailto:certdirector@hrci.org):

- If you are an aPHR®, aPHRi™, PHR®, PHRca®, SPHR®, GPHR®, PHRi™, and/or SPHRi™-certified HR professional who is still certified; in good standing; and are active in your current 3-years recertification cycle ("Member-Active"), you may request Emeritus Status consideration. Please proceed and complete the next steps
- I, \_\_\_\_\_ (Full Name), attest that I am applying for Emeritus Status as I meet all the following requirements:
  - ✓ age 60 or older and am attaching proof of my age (a copy of a valid driver's License, Passport, etc.)
  - ✓ am retiring from the HR profession:
  - ✓ am also retiring from work that include: consulting; private and public-sector HR work; and/or lecturing part-time at a college or university.
- I am HRCI-certified in following credential(s): (Use an X to mark in the table, as applicable.)

Credential	Mark as appropriate	Credential	Mark as appropriate	Credential	Mark as appropriate	Credential	Mark as appropriate
aPHR®		PHR®		SPHR®		PHRca®	
aPHRi™		PHRi™		SPHRi™		GPHR®	

- I currently am employed at: \_\_\_\_\_ (Name of Organization **OR** self-employed.)

**HRCI**  
**1725 Duke Street**  
**Suite 400**  
**Alexandria, VA 22314**  
**Telephone: 1-571-551-6700**



➤ I intend to retire effective \_\_\_\_\_(DATE).

➤ My contact information is as follows:

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Country: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**PAYMENT AUTHORIZATION:**

- ✓ To complete this application, you must pay/authorize the one-time processing fee of **150 USD** which will also include sending you an Emeritus designation certificate to the address of record using tracked delivery.
- ✓ Payment can be made via Visa, MasterCard or American Express credit cards or with a check payable to "HR Certification Institute"; money order, certified/cashier's check; or organizational check.
- ✓ **Send this completed form in an e-mail to: [certdirector@hrci.org](mailto:certdirector@hrci.org)**

\*\*\*\*\*PLEASE DO NOT SEND CASH\*\*\*\*\*

- ✓ For payment by Visa, MasterCard or American Express, provide the following required information:

Charge my:  VISA  MasterCard  American Express

\_\_\_\_\_  
CREDIT CARD NUMBER

\_\_\_\_\_  
EXP. DATE

\_\_\_\_\_  
CARD SECURITY CODE

\_\_\_\_\_  
CARDHOLDER NAME

\_\_\_\_\_  
CARDHOLDER SIGNATURE

\_\_\_\_\_  
BILLING ADDRESS

\_\_\_\_\_  
CITY/COUNTRY

\_\_\_\_\_  
STATE ZIP CODE/COUNTRY CODE

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