

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

EMPLOYER \_\_\_\_\_ STATE \_\_\_\_\_

*Municipality or County*

# Application for Continuing Certification Program

**BY THE BOARD OF THE  
NEW MEXICO LEAGUE OF ZONING OFFICIALS**  
(A Subsection of the New Mexico Municipal League)



**PREPARED TO HELP  
WITH THE GROWING NEEDS  
OF NEW MEXICO**

**THIS APPLICATION HAS THREE PARTS:**

**•BASIC REQUIREMENTS**

All of these must be met before the application can be processed (page 3)

**•NMLZO PARTICIPATION, CONTINUING EDUCATION, PROFESSIONAL CONTRIBUTIONS**

Attach copies of certificates, and supporting documents (pages 4 through 7)

**•VERIFICATION OF EMPLOYMENT EXPERIENCE**

Attach job description(s). (page 7)

**FOR OFFICIAL NMLZO USE: APPROVED \_\_\_\_\_ 50 TOTAL POINTS FULFILLED \_\_\_\_\_ DATE \_\_\_\_\_**

NEW MEXICO LEAGUE OF ZONING OFFICIALS  
P.O. Box 846 • SANTA FE, NEW MEXICO 87504

# **New Mexico League of Zoning Officials**

## **Purpose**

The purpose of the New Mexico League of Zoning Officials (NMLZO) is to identify, foster and promote academic and technical educational programs for zoning officials; to provide better governmental response to the needs of all citizens; and to establish and maintain a line of communication and open dialogue among participants at all levels of the planning and zoning process.

## **Code of Ethics**

While in the context of our professional capacity, we will:

- \* Place the interest of the community before any personal interest.
- \* Conduct business in a manner that will provide the maximum benefit to the community.
- \* Promote the professional image of Zoning Officials.
- \* Ensure that the welfare of the membership of the NMLZO is protected.

# PERSONAL DATA (Please Print or Type.)

Name \_\_\_\_\_  
Last First Middle

Title \_\_\_\_\_

Employed by \_\_\_\_\_  
Municipality or County

Mailing Address \_\_\_\_\_  
Street Address

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

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail \_\_\_\_\_

## BASIC REQUIREMENTS

- I am employed as a Zoning/Planning/Code Enforcement Official. \_\_\_\_\_  
Title
- I successfully completed CZO Certification on \_\_\_\_\_ (Copy of certificate or letter attached).  
Date/Year
- I am an active member of the New Mexico League of Zoning Officials.
- I have successfully achieved the required points for continuing certification as demonstrated in this application.
- I have fulfilled the 4 year requirement between each certification application process.
- I have reaffirmed my belief in and practice of the NMLZO Purpose and Code of Ethics.
- I have enclosed the \$85.00 application fee and understand that it is not refundable. (Payable to New Mexico League of Zoning Officials)

Verified by NMLZO:  All Basic Requirements Met.

# NMLZO PARTICIPATION, CONTINUING EDUCATION & PROFESSIONAL CONTRIBUTIONS

| CATEGORY  | POINTS               | PROGRAM STANDARD                                       |
|---|----------------------|--|
| 1. Conference Attendance                                      | 15                   | Per Conference   |
| 2. NMLZO Service President                                    | 8                    | Per Year   |
| 3. Elected Board Member                                       | 6                    | Per Year   |
| 4. Committee Chair  | 5                    | Per Year   |
| 5. Committee Member   | 2                    | Per Year   |
| 6. Newsletter Editor  | 4                    | Per Year   |
| 7. Past NMLZO Service<br>(Prior to 01/03 for above positions) | Same points as above | For Initial Application Only                           |
| 8. NMLZO Annual Membership                                    | 1                    | For Initial Application Only<br>Per Year of Membership |
| 9. Conference Speaker   | 1                    | Per Presentation                                       |
| 10. Associate Speaker/Panelist                                | 1                    | Per Presentation                                       |
| 11. Related Certifications                                    | 1                    | Per Year of Certification                              |
| 12. Conference Program Development                            | 1                    | Per Workshop   |
| 13. Group Recruitment   | 1                    | Per Group  |
| 14. Membership Recruitment                                    | 1                    | Per Member   |
| 15. Exhibitor Recruitment                                     | 1                    | Per Exhibitor  |
| 16. Newsletter Articles                                       | 1                    | Per Edition  |
| 17. Community/Public Relations                                | 1                    | Per Year   |
| 18. Sponsor Attainment  | 2                    | Per \$250.00   |
| 19. Fund Raising  | 1                    | Per \$50.00  |

## PROGRAM EVALUATION OF NMLZO PARTICIPATION, CONTINUING EDUCATION & PROFESSIONAL CONTRIBUTIONS

**The Categories listed above correspond with the boxes listed below. Please be thorough when providing the following information. IMPORTANT NOTE: Supporting documentation is required to satisfy each category.**

|   | POINTS EARNED    |
|---|------------------|
| 1. Conference Attendance (15 Points per Conference):<br>Conference Date: _____ Location _____<br>Conference Date: _____ Location _____<br>Conference Date: _____ Location _____ | <br><br><br><br> |

# PROGRAM EVALUATION OF NMLZO PARTICIPATION, CONTINUING EDUCATION & PROFESSIONAL CONTRIBUTIONS- *continued*

**POINTS  
EARNED**

|   |  |
|---|--|
| <p>2. NMLZO President (8 points per year)<br/>Term of Office from: _____ to _____</p>   |  |
| <p>3. Elected Board Member (6 points per year)<br/>Term of Office from: _____ to _____</p>  |  |
| <p>4. Committee Chair (5 Points per year)<br/>Term of Office from: _____ to _____</p>   |  |
| <p>5. Committee Member (2 Points per year)<br/>Term of Office from: _____ to _____</p>  |  |
| <p>6. Newsletter Editor (4 Points per year)<br/>Term of Office from: _____ to _____</p>   |  |
| <p>7. Past Service - One Time Only for Initial Application (Same Points for 2. – 7. above)<br/>Term of Office from: _____ to _____</p>  |  |
| <p>8. NMLZO Annual Membership – One Time Only for Initial Application (1 Point per year of Membership)<br/>From: _____ to _____<br/> <div style="display: flex; justify-content: space-around; width: 100%; font-size: small;"> <span>Year &amp; Date</span> <span>Year &amp; Date</span> </div> <br/> From: _____ to _____<br/> <div style="display: flex; justify-content: space-around; width: 100%; font-size: small;"> <span>Year &amp; Date</span> <span>Year &amp; Date</span> </div> </p> |  |
| <p>9. Conference Speaker (1 Point per Presentation)<br/>Conference Date: _____ Location _____<br/>Topic: _____</p>  |  |
| <p>10. Associate Speaker/Panelist (1 Point per Presentation)<br/>Conference Date: _____ Location _____<br/>Topic: _____</p>   |  |

# PROGRAM EVALUATION OF NMLZO PARTICIPATION, CONTINUING EDUCATION & PROFESSIONAL CONTRIBUTIONS- *continued*

**POINTS  
EARNED**

|   |  |
|---|--|
| <p>11. Related Certifications i.e. Floodplain Managers Association, State Contractors, etc.<br/>(1 Point per year of Certification)</p> <p>From: _____ to _____<br/> <span style="margin-left: 100px;">Year &amp; Date</span> <span style="margin-left: 150px;">Year &amp; Date</span></p> <p>From: _____ to _____<br/> <span style="margin-left: 100px;">Year &amp; Date</span> <span style="margin-left: 150px;">Year &amp; Date</span></p> |  |
|---|--|

|  |  |
|--|--|
| <p>12. Conference Program Development - List Specifics i.e. speakers, topic, etc.<br/>(1 Point per Workshop)</p> <p style="text-align: right;">Date: _____</p> |  |
|--|--|

|  |  |
|--|--|
| <p>13. Group Recruitment (1 Point per Group)</p> <p>Municipality/County: _____ Group Name: _____</p> <p>Municipality/County: _____ Group Name: _____</p> |  |
|--|--|

|  |  |
|--|--|
| <p>14. Membership Recruitment (1 Point per Member)</p> <p>New Member's Name: _____ Title: _____</p> <p>Municipality/County: _____</p> <p>New Member's Name: _____ Title: _____</p> <p>Municipality/County: _____</p> |  |
|--|--|

|   |  |
|---|--|
| <p>15. Exhibitor Recruitment (1 Point per Exhibitor)</p> <p>Company Name: _____ Rep Name: _____</p> <p>Conference Date: _____ Location: _____</p> |  |
|---|--|

|   |  |
|---|--|
| <p>16. Submittal of Newsletter Articles (1 Point per Edition)</p> <p>Publication Date: _____ Article Title: _____</p> <p>Publication Date: _____ Article Title: _____</p> <p>Publication Date: _____ Article Title: _____</p> |  |
|---|--|

|   |  |
|---|--|
| <p>17. Community/Public Relations to promote or raise awareness of NMLZO (1 Point per Year)</p> <p>Meeting Date: _____ Location: _____</p> <p>Municipality/County Name: _____</p> |  |
|---|--|

# PROGRAM EVALUATION OF NMLZO PARTICIPATION, CONTINUING EDUCATION & PROFESSIONAL CONTRIBUTIONS- *continued*

POINTS  
EARNED

|   |  |
|---|--|
| 18. Sponsor Attainment (2 Points per \$250.00)<br>Company Name: _____ Rep Name: _____<br>Course Topic (If Speaking) _____<br>Conference Date: _____ Location: _____ |  |
|---|--|

|   |  |
|---|--|
| 19. Fund Raising -- \$50 Minimum Value per Item below (1 Point per \$50)<br>Item Sold: _____ Event Date: _____<br>Item Purchased: _____ Event Date: _____<br>Item Donated: _____ Event Date: _____<br>Item Solicited: _____ Event Date: _____ |  |
|---|--|

## EVALUATION SUMMARY

### NMLZO PARTICIPATION, CONTINUING EDUCATION & PROFESSIONAL CONTRIBUTIONS

Total Points Achieved (50 Points Required): \_\_\_\_\_

**I hereby certify that the information and supporting documentation submitted is true and accurate to the best of my knowledge.**

Member Signature: \_\_\_\_\_ Date \_\_\_\_\_

## VERIFICATION OF EMPLOYMENT EXPERIENCE

### ADMINISTRATIVE EXPERIENCE

- A. Full-time experience in administrative, or enforcement capacity in Zoning, Code Enforcement and/or Planning in Local Government *within the last 5 years.*
- B. Part-time experience or non-administrative position in Zoning Code Enforcement *within the last 5 years.*
- C. Other full-time administrative position in Federal, State and Local Government in New Mexico prior to Zoning/Code Enforcement experience *within the last 5 years.*

#### PRESENT POSITION

#### DATES

- |   |            |
|---|------------|
| 1. Position _____   | from _____ |
| <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time | to _____   |
| 2. Position _____   | from _____ |
| <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time | to _____   |

**NOTE:** For verification purposes, please submit Job Descriptions for all positions listed.

# COMPLETION OF APPLICATION

Upon completion of application, please mail the following:

- this application
- non-refundable application fee -- \$85.00 (Payable to NM League of Zoning Officials)
- certificates & supporting documents

Visa       MasterCard

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name of Card Holder: \_\_\_\_\_  
*If different from Applicant Name*

Statement Address: \_\_\_\_\_ Zip Code#: \_\_\_\_\_  
*Address where Billing Statement is mailed*

TO: NMLZO BOARD OF DIRECTORS  
C/o New Mexico Municipal League  
P.O. Box 846  
Santa Fe, NM 87504-0846  
Attention: Linda Alire-Naranjo  
(505-982-5573; 800-432-2036; lalire@nmml.org)

**Deadline:** Within 60 days after a Semi-Annual Meeting or an Annual Meeting.

All decisions regarding Continuing Certification shall be final as determined by the NMLZO Board/Certification Committee. If you have any questions, please feel free to call any NMLZO Board Member.

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## CERTIFICATION EVALUATION (FOR OFFICIAL USE ONLY)

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-All Basic Requirements Met:

-Fulfilled Four Year Requirement between each Certification Process:

-CZO Certification achieved on: \_\_\_\_\_

- NMLZO Participation, Continuing Education & Professional  
Contributions points earned:

Total of 50 points attained:

**MEETS ALL CONTINUING CERTIFICATION REQUIREMENTS:**

Approved by the NMLZO Board on: \_\_\_\_\_  
*Date*