

NAME _____

TITLE _____

EMPLOYER _____ STATE _____

Municipality or County

APPLICATION FOR CERTIFICATION

BY THE CERTIFICATION BOARD OF THE
NEW MEXICO LEAGUE OF ZONING OFFICIALS

(A Subsection of the New Mexico Municipal League)

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THIS APPLICATION HAS THREE PARTS:

• **BASIC REQUIREMENTS**

All of these must be met before the application can be processed (page 2)

• **EDUCATION/CONTINUING ED**

Attach a copy of diploma, certificate, transcript of courses or supporting documents. (pages 3, 4 & 5)

• **EXPERIENCE**

(page 6)

FOR OFFICIAL NMLZO USE: APPROVED _____ 100 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

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.
- * Insure that the welfare of the membership of the NMLZO is protected.

G. How many other Educational Seminars have you attended relating to your position? _____ @ 2 for each
 8 hr. seminar = _____
 Max.10

<u>DATES</u>	<u>TRAINING OR WORKSHOP TITLE</u>	<u>ACTUAL</u>	<u>ESTIMATED HOURS</u>	<u>POINTS</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Note: Accompanying documentation must be provided for all Conferences/Meetings/Workshops listed.

EXPERIENCE

<u>ADMINISTRATIVE EXPERIENCE</u>	<u>POINTS</u>	<u>MAXIMUM</u>
A. Full-time experience in administrative, or enforcement capacity in Zoning, Code Enforcement and/or Planning in Local Government.	12 per yr.	70
B. Part-time experience or non-administrative position in Zoning Code Enforcement.	3 per yr.	25
C. Other full-time administrative position in Federal, State and Local Government in New Mexico prior to Zoning/Code Enforcement experience.	2 per yr.	10

<u>PRESENT POSITION</u>	<u>DATES</u>	<u>POINTS PER YEAR</u>	<u>ESTIMATED POINTS</u>	<u>FOR NMLZO USE</u>
1. Position _____ <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	from _____ to _____			
	Total yrs. _____	@ _____	=	
2. Position _____ <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	from _____ to _____			
	Total yrs. _____	@ _____	=	
3. Position _____ <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	from _____ to _____			
	Total yrs. _____	@ _____	=	
4. Position _____ <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	from _____ to _____			
	Total yrs. _____	@ _____	=	
			Total	_____

NOTE: Please submit Job Descriptions for all positions listed.

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COMPLETION OF APPLICATION

Upon completion of application, please mail the following:

- this application
- \$65 application fee
- Transcripts, diploma, certificates or 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

<p>TO: NMLZO CERTIFICATION BOARD OF DIRECTORS New Mexico Municipal League P.O. Box 846 - Santa Fe, NM 87504-0846 ATTENTION: Renee Cantin</p>

Deadline: 60 days after the Semi-Annual Meeting or the Annual Meeting.