

CTP Candidate Application



Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State/Province: _____ Postal Code: _____

Country: _____ E-mail: _____

Phone: _____ Fax: _____

How did you hear about the program? _____

Enrollment Type:

- New NTA Member Enrollee — \$600
- New Non-member Enrollee — \$900
- Rollover (NTA Member) — \$75

Office Use Only

Member# _____

Method of Payment:

- Enclosed is my check payable to the National Tour Association.
- Charge to credit card account #: _____
(Name on card: _____ Expiration: _____)
- Please Invoice me

Education (please print)

Please list your educational background. Points are given based on highest degree obtained and education does not have to be travel and tourism related in order to earn points. (Continue on a separate sheet if necessary.)

School	Degree	Year Graduated

Be sure to complete both pages and submit with the appropriate enrollment fee to:
National Tour Association, Attn: CTP Enrollment
546 East Main St.
Lexington, KY 40508
www.NTAonline.com
800.682.8886 or 859.226.4444

Employment (please print)

Please list your tour and travel related employment experience beginning with your present position. Points are given based on number of years in the industry. (Continue on a separate sheet if necessary.)

**Note: A minimum of 3 years full-time employment in the travel industry is required to apply.*

Dates	Company Name	Title/Position

Industry Service (please print)

Please list your industry related service. Points are given for industry convention chairperson, board/executive committee/council, article publication, industry speaker or moderator, industry committee service, Tourism Cares participation and industry convention attendance. (Continue on a separate sheet if necessary.)

Dates	Duties/Responsibilities

Candidates must achieve a minimum of 15 points based on education, employment and industry service. For a detailed list of point values, visit www.NTAonline.com.

Please read and sign below.

I hereby certify that all of the information presented on this application is true and correct, and agree that misrepresentation or omission of facts called for in this application may affect my certification, and/or may result in immediate revocation of all privileges bestowed by the National Tour Association as a result thereof.

I agree to abide by all the rules, regulations and policies of the National Tour Association (NTA) concerning the requirements for successful completion of the Certified Tour Professional (CTP) program, and understand that ownership of all materials submitted for the program will be shared by NTA, Temple University and me.

I fully subscribe to the NTA Code of Ethics as outlined by the association, and understand the CTP designation may not be used prior to receiving written authorization from the National Tour Association.

Signature

Date

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