

**VOLUNTARY
TOWNSHIP CLERK CERTIFICATION
PROGRAM (VTCC)
Proof of Participation**



PLEASE PRINT – PLEASE COMPLETE EVERY LINE

Date of Original Application: _____

Last Name: _____

First Name: _____

Township Clerk OR Township Deputy Clerk

County: _____ Township: _____

Address: _____

City/Zip: _____

Email: _____

Phone: _____

Please refer to the VTCC Official Rules for explanation of Education and Community Service components of the Voluntary Township Clerk Certification Program. This is a two-year program for certification.

Education

✘	Item	Session Title or Description or Location	Date
	Part I: District Education Session		
	Fall Conference		
	Part II: District Education Session		
	Fall Conference		
	FOIA / OMA Training	<input type="checkbox"/> Certificate copies attached	
	TOI Webinar		
	TOI Webinar		
	Professional Development Course		
	Professional Development Course		
	Local Countywide Organization Education Session		

Community Service

Provide a letter or other document(s) from the organization(s) of which you are associated that reflects your participation. If volunteer hours are available, please provide a short report that details the number of hours that you have contributed to your community. Show certificate of participating for the CPR/AED Training. If in doubt whether or not your service counts, provide documentation to show participation.

Please send this completed Proof of Participation form and any accompanying documents to:

Clerk Katy Dolan Baumer
Hanover Township
250 S. State Route 59
Bartlett, IL 60103