



American Culinary Federation Lifetime Certification Application

American Culinary Federation, Inc. • 180 Center Place Way • St. Augustine, FL 32095 • Toll-free: (800) 624-9458 • Fax: (904) 940-0741 • www.acfchefs.org

Once completed either email to certify@acfchefs.net, mail this form and payment to the address above or fax to number above.

Personal Information

First Name: _____ MI: ____ Last Name: _____ ACF #: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Name (as it should appear on certificate): _____

Certification Level

Please check level you are applying for

Cooking Professionals	ACF Member Rate	Non-Member Rate
Certified Culinarian® (CC®)	\$50	\$135
Certified Sous Chef® (CSC®)	\$120	\$270
Certified Chef de Cuisine® (CCC®)	\$140	\$290
Certified Executive Chef® (CEC®)	\$210	\$360
Certified Master Chef® (CMC®)	\$300	\$450
Personal Cooking Professionals	ACF Member Rate	Non-Member Rate
Personal Certified Chef™ (PCC™)	\$120	\$270
Personal Certified Executive Chef™ (PCEC™)	\$210	\$360
Baking and Pastry Professionals	ACF Member Rate	Non-Member Rate
Certified Pastry Culinarian® (CPC®)	\$50	\$135
Certified Working Pastry Chef® (CWPC®)	\$120	\$270
Certified Executive Pastry Chef® (CEPC®)	\$210	\$360
Certified Master Pastry Chef® (CMPC®)	\$300	\$450
Culinary Administrators	ACF Member Rate	Non-Member Rate
Certified Culinary Administrator® (CCA®)	\$250	\$400
Culinary Educators	ACF Member Rate	Non-Member Rate
Certified Secondary Culinary Educator® (CSCE®)	\$140	\$290
Certified Culinary Educator® (CCE®)	\$210	\$360

Lifetime Certification Application

Lifetime Certification is offered to certified chefs upon reaching the age of 62; upon reaching the age of 55 if fully retired; or if retired from the industry at any age due to disability. Chefs must hold a current certification to be eligible to apply for Lifetime Certification for that level. Please indicate Lifetime Certification request and attach appropriate documentation.

Age 62 (copy of a driver's license, birth certificate or other official documentation providing applicant's age)

Age 55 if fully retired from the industry (documentation of full retirement from the industry)

Retired due to disability (Letter from a physician attesting the certificant is retired for medical reasons and not able to work. Personal and private information is not required.)

Payment Information

I have enclosed a check made payable to the American Culinary Federation (ACF).

Please bill my: Visa MasterCard Amex Discover

Credit Card Number: _____ Exp Date: _____ CSC #: _____ Amount: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Name on Account: _____ Signature: _____

With this application, I verify the information provided is truthful and accurate. I grant the ACF permission to investigate employment and education, and I release from liability all persons and companies supplying such information. I agree to adhere to the ACF Certification Code of Ethics, Designation Usage and policies of the certification program and agree to accept the ACF Certification Commission's determination on all certification decisions. All certifications are awarded for five years, except CC® and CPC®, which are awarded for three years, and recertification is required to maintain certification designation. I acknowledge that false statements or misrepresentation may result in the revocation of this application and/or approved certification. I agree to allow ACF to share my certification accomplishment in ACF communications and with local newspapers and industry publications.

Check this box if you do **not** want your certification accomplishments included in ACF communications or shared with media.

Signature: _____ Date: _____

Optional Donation

I have included an optional one time donation of \$50 in support of an ACF Foundation Program. I have selected the following 501 (c) (3) not-for-profit program: ACF Culinary Team USA AAC Scholarship Ray Marshall Pastry Fund