



Massachusetts Certified Horticulturist Annual Re-certification Point Report

Name: _____ Date: _____

Home Address: _____ Town/State/Zip: _____

Home Phone: (____) _____

Membership in MNLA or employment by an MNLA member
Member's Name: _____

Membership in other horticulture associations or employment by such members
Please specify: 1) _____
2) _____

Attendance at industry-related, full-day short courses or educational seminars.
Program name/dates: _____

Attendance at New England Grows

Service to MNLA: As an officer
 As a Director
 As a Committee Member
 Staffing Flower Show Display

Service to other horticultural associations
As an officer _____
 (Association and Office)

As a board member or committee chairperson

 (Association and Committee)

Points Allowed	Points Earned
1 point/year	
½ point each (1 point max.)	
1 point/day	
1 point/day	
1 point/year	
1 point/year	
1 point/year	
½ point/4 hrs (1 point max.)	
½ point/yr	
½ point/yr	

(Continued)

Page 2

University courses in horticultural subjects

 School and Subject:

Training courses of horticultural associations of five or more wks.

 (Association and course title)

Speaker at horticultural associations

 (Association and date)

 (Association and date)

Panel discussion participant

 (Association and date)

 (Association and date)

Instructor at university in horticulture

 (School and subject)

Published articles on horticulture

 (Publication, topic and date)

Pesticide applicators certification or license

 (State and license number)

Total Points Earned ----->>

Total Points Required ----->>

Signature _____

Points Allowed	Points Earned
1 point/credit hour	
1 point/course	
1 point/session	
½ point/panel (1 point max.)	
1 point/course	
1 point/article	
1 point/year	
	5