



ACHIEVEMENT PROGRAM MASTER MODEL RAILROADER STATEMENT OF QUALIFICATIONS FORM JANUARY 2025

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Member's Name: _____ NMRA #: _____ Exp: _____

Street: _____ City: _____ State/Prov: _____

ZIP/PC: _____ Country: _____ NMRA Region: _____ Division: _____

Date Submitted: _____ E-Mail: _____ Phone: _____

	Achievement Certificate	Date Earned	Certificate #
	Master Builder Motive Power		
	Master Builder Cars		
	Master Builder Structures		
	Master Builder Scenery		
	Master Builder Prototype Models		
	Model Railroad Engineer Civil		
	Model Railroad Engineer Electrical		
	Chief Dispatcher		
	Association Official		
	Association Volunteer		
	Model Railroad Author		

Member's Statement and Agreement:

I certify that I have completed all of the requirements for this Certificate of Achievement as listed above and that I will agree to assist other members in this subject whenever possible, whether or not they are participants in the Achievement Program.

NAME: _____ SIGNATURE: _____ Date: _____

Certification of Region Achievement Program Chair

As the NMRA Region Achievement Program Chair of the _____, I certify that I have examined this Statement of Qualifications and, having compared it to the stated requirements for this certificate, I am satisfied that the stated requirements have been met.

SIGNATURE: _____ Date: _____ Region Cert #: _____

Approval by AP National Executive Vice-Chair

APPROVED: _____ Date _____

Name:

MMR#