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| Certification Application Form  *All levels, all domains* |  |

***Please do not print this document unless it is absolutely necessary to do so.***

| Section 1. Overview | | | | |
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| 1.1 What level and domain are you applying for? *(check one box only)* | | | | |
| **Project Management Domain** | | | **Program and Portfolio Domains** | |
| IPMA® Level A, Certified Project Director | |  | IPMA® Level A, Certified Program Director |  |
| IPMA® Level B, Certified Senior Project Manager | |  | IPMA® Level A, Certified Portfolio Director |  |
| IPMA® Level C, Certified Project Manager | |  | IPMA® Level B, Certified Senior Program Manager |  |
| IPMA® Level D, Certified Project Management Associate | |  | IPMA® Level B, Certified Senior Portfolio Manager |  |
| 1.2 Privacy and Confidentiality | | | | |
| IPMA-USA will not share your documents with anyone who has not signed our non-disclosure agreement. If you need additional assurances, you must request them *before* you submit any documents. Redacted documents are not acceptable. | | | | |
| 1.3 Data Entry | | | | |
| Movement Between Cells | Use your TAB key to move to the next field. If you click outside of an entry field, MS Word will move the cursor to the next available field. | | | |
| Manual Entry | Manual entry fields are shaded gray (like this cell). | | | |
| Menu Entry Fields | Menu entry fields are shaded light yellow (like this cell). | | | |

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| Section 2. Personal Information *(\*starred fields are required)* | | | | |
| 2.1 Contact Information | | | | |
| \*Given Name(s) |  | \*Surname | |  |
| \*Employer Name |  | | | |
| \*Address Type | *(if you select “Work,” we will include your Employer Name in your postal mail address)* | | | |
| \*Street and No. |  | Mail Stop | |  |
| \*City |  | \*State | |  |
| \*Postal Code |  | \*Country | | USA |
| \*Phone | *(include country code for non-USA numbers)* | | | |
| \*Primary email |  | | Secondary email |  |
| 2.2 \*Your name as you would like it to appear on your certificate *(use Initial Caps)* | | | | |
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| Section 3. Assurances, Releases, and References | | | | | | |
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| You can download the relevant documents from the link in Section 1. | | | | | | |
| 3.1 Applicant Assurances *(check one box in each row)* | | | | | Yes | No |
| I have read and understood IPMA’s Code of Ethics and Professional Conduct, and I agree to abide by it while certified by IPMA-USA. | | | | |  |  |
| I have read and understood the Ethics, Appeals, and Complaints Policies and Procedures, and I agree to be bound by them. | | | | |  |  |
| I understand that my application fees are non-refundable. | | | | |  |  |
| I understand that IPMA-USA retains ownership of any certificate awarded, physical or electronic. | | | | |  |  |
| 3.2 Applicant Releases *(check one box in each row)* | | | | Yes | No | N/A |
| If I am assessed as competent, I agree to have my name included in IPMA’s online database. | | | |  |  |  |
| If my employer or another third party paid my fee, I agree to have the results of my assessment released to them. (Note: some third party payers require you to check “yes”) | | | |  |  |  |
| 3.3 Professional References *(two required)* | | | | | | |
| 3.3.1 Professional Reference #1 | | | | | | |
| \*Name |  | \*Relationship |  | | | |
| \*Email |  | Phone |  | | | |
| 3.3.2 Professional Reference #2 | | | | | | |
| \*Name |  | \*Relationship |  | | | |
| \*Email |  | Phone |  | | | |

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| Section 4. Assessment Process | |
| Basis of Assessment | The IPMA Individual Competence Baseline (IPMA ICB) describes the competence elements that will be used to assess your competence. If you are not already familiar with the ICB, you should review it prior to continuing with the application process. You can download a ***free*** copy as follows:   * Go to https://shop.ipma.world/ * Click on the link to purchase the hard copy version * Click on the link to download the free e-Book.   All levels must demonstrate competence against 80% of the IPMA ICB Competence Elements. |
| Experience Requirements | Levels A, B, and C: click on the appropriate link in the table on this page: https://ipma-usa.org/Certification/  Level D: there is no work experience required. However, 3-6 months of project work prior to taking the exam is highly recommended. |
| Exam and Interview Dates | Exams and interviews are normally done online. We make every effort to schedule your exam and your interview at your convenience.  If you are a member of a group, your dates with be scheduled through your group coordinator. |
| Special Accommodations | If you require an accommodation of any sort for the exam or the interview, please describe it below. |
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| Expiration | ***Assessments must be completed within eighteen (18) months of payment.*** |

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| Section 5. Payment and Signature | | |
| 5.1 Payment | | |
| Fees | Our current fee schedule was part of the application package you downloaded. | |
| Member Rates | If you wish to take advantage of member rates, you must join IPMA-USA before submitting your application. You can join here: https://ipma-usa.org/join-us | |
| Group Members | Your group coordinator will provide instructions on how to pay. | |
| Individual Applicants | You must pay the appropriate amount before we can process your application. Amounts paid are non-refundable. | |
| 5.2 Application Submission | | |
| Submit your document package via **e*mail*** to: Cert-Applications@IPMA-USA.org. We will contact you about next steps within ten (10) business days.  Your application form (this document) must be submitted as an MS Word document. Your self-assessment and experience summary must be submitted as MS Excel documents. Your resume may be submitted as an MS Word or PDF document. | | |
| 5.3 Signature | | |
| All Levels | Resume (or Curriculum Vitae) | Self-Assessment |
| Levels A, B, and C | Experience Summary | Management Complexity Ratings |
| Signature | I declare that the information I have provided in the items checked above is true and correct.  I declare that typing my name below represents my electronic signature:  /s/ | |
| Date (yyyy-mm-dd): | |

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