



<input type="checkbox"/>	Certification
<input type="checkbox"/>	Re-Certification

**CERTIFIED MUNICIPAL MANAGER - APPLICATION FORM**

(Please fill in the following questionnaire as completely and honestly as possible to aid in consideration of your application. PLEASE PRINT.)

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_ Present Title: \_\_\_\_\_

Location: \_\_\_\_\_

Years in present position: \_\_\_\_\_

**EDUCATION**

Institution	Degree Obtained	Graduation Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

**PREVIOUS EMPLOYMENT**

Position	Location	Length of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____

**PROFESSIONAL CERTIFICATIONS**

(Certified Assessor, Chief of Police, Plumbing Inspection, etc.)

\_\_\_\_\_

\_\_\_\_\_

Pursuant to Article XII, Section B (3) of the Maine Town and City Management Association By-Laws, participation in activities designed to improve managerial skills is required for certification as a public manager. The criteria for certification under this section requires active and direct participation in activities of at least 240 hours during the prior three (3) years from the date of this application with no more than 160 hours in either of the two categories shown on the next page:

**1. Professional Association or Intergovernmental Services and Participation.**

Includes service as an officer of a national, state or regional association, service on a committee or task force or active participation in regularly scheduled events or of any professional association for public managers. Also includes service on a committee or advisory board of a regional, state or federal government organization or institution only where such service is not considered a requirement for the continuing employment of the chief administrative officer. Please provide the published name, the actual dates of attendance and the actual number of hours of active and direct participation in each activity.

ACTIVITY                      DATES                                      HOURS OF PARTICIPATION                                      COMMENTS

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**TOTAL NUMBER OF HOURS** \_\_\_\_\_

**2. Development of General Administrative/Management Skills**

(Receiving 64 hours of educational courses for the MTCMA)

Includes such educational areas as university or college courses, national or state league or association seminars (ICMA, MMA, BPA, etc.) or authorship of any articles or other form of organized information dissemination related to administrative or government management. Please provide the published name of any course or seminar attended, the sponsoring organization and the number of hours of active and direct participation. The name of the publishing organization for authored articles or the sponsor for a presentation of information should be provided under "comments."

Leadership 16                                      EOW/Elected Relations 4                                      Finance Budget 16  
Human Resources 16                                      Legal 8                                      Ethics 4

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**TOTAL NUMBER OF HOURS** \_\_\_\_\_

**3. Manager as Educator**

(8 Hours of providing education to the public or Peers/Civic Organization)

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**TOTAL NUMBER OF HOURS** \_\_\_\_\_

# **FOR COMMITTEE USE ONLY**

NAME: \_\_\_\_\_

½ day = 4 hours

TOWN/CITY: \_\_\_\_\_

1 day = 8 hours

## **MTCMA CERTIFICATION TALLY SHEET**

1. Professional Association or Intergovernmental Services and Participation: (This includes service as an officer of a national, state or regional Association - also includes service on a committee or an advisory board of a regional, state or federal government organization only if it is not considered a requirement of your position):

ACTIVITY	DATES	HRS. SPENT	SPONSOR	COMMENTS
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**\*TOTAL HOURS SPENT** \_\_\_\_\_

2. Development of General Administrative/Management Skills: (This includes courses/sessions attended - MMA Convention, BPA programs, Annual Tax Collectors'/Treasurers' School, ICMA seminars, the "Lamont Cranston" Program. Also include here if you are the author of a published article):

ACTIVITY	DATES	HRS. SPENT	SPONSOR	COMMENTS
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**\*TOTAL HOURS SPENT** \_\_\_\_\_

NOTE: 240 hours are required during a 3-year period, and no more than 160 hours in either category will be allowed.