

Association Management Specialist® Redesignation Form

Fill in this application with Adobe Acrobat Reader or print clearly in ink. To work in Reader: save the file on your computer's desktop, complete the form, and save again using your last name in the filename (e.g., AMS_Jones.pdf) before printing. If additional pages are needed, please label clearly and attach to this application. In section II on page 2, indicate relevant program participation completed in the last three years including point totals in the right column.

Submit completed form to the CAI headquarters office, 6402 Arlington Blvd., Suite 500, Falls Church, VA 22042, e-mail to caieducation@caionline.org or fax to (703) 970-9558. Form is due by the August deadline indicated on your redesignation notice. No fee is required with this form, as fee is billed separately. For further information please contact (888) 224-4321.

I. Designee Information

▼ CAI MEMBER NUMBER								,	▼ AMS NUMBER																				
▼	▼ FIRST NAME AND MIDDLE INITIAL																												
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▼ BUSINESS PHONE																													

II. Continuing Education

AMS designees are required to provide proof of continuing education credits every three years of one CAI PMDP course (M-201, etc.)

REQUIRED I One CAI PMDP course or PCAM Case Study (such as M-201, etc.)					
Attach copy of completion certificate.	PMDP COURSE NUMBER				
In addition, AMS designees require eight hours of other continuing education credit hours webinar, conference, or Skill Builders).	(e.g., chapter	program,			
CAI Chapter Program—Hours calculated on advertised length of program. Attach a copy of Chapter Participant Verification Form (supplied by chapter on the day of the program)	CRFDI	T HOURS			
CAI Headquarters Annual Conference	ONES!!	1100113			
1 day attendance = 6 hours, 2 days = 12 hours, 3 days = 15 hours	CREDIT	T HOURS			
CEO-MC Retreat 1 day attendance = 6 hours, 2 days = 12 hours	CREDIT	T HOURS			
CAI Headquarters Law Seminar 1 day attendance = 6 hours, 2 days = 12 hours	CREDIT	T HOURS			
Approved courses for state Manager Licensing Renewal Requirements— Hours calculated on state approved hours. Attach a copy of completion certificate.	CREDIT	T HOURS			
CertainTeed approved online programs —2 hours. Must attach completion certificate (www.certainteed.com)	CREDIT HOURS				
CAI headquarters manager webinars Please visit www.caionline.org/webinars for details	CREDIT HOURS				
Large-Scale Managers Workshop 1 day attendance = 6 hours, 2 days = 12 hours	CREDIT HOURS				
Virginia Leadership Retreat 1 day attendance = 6 hours, 2 days = 12 hours	CREDI ¹	r hours			
Other Industry-related programs (please list and attach documentation)					
	CREDIT	Γ HOURS			
	тс	TAL			
III. Ethics Please answer the following questions and sign on the following page.					
Have you been involved in reorganization for the benefit of creditors or in bankruptcy as a debtor since your last redesignation? If yes, attach a detailed explanation.	☐ YES	∐ NO			
Have you ever been convicted of a felony or misdemeanor (equivalents thereof), or imprisoned under sentence for any felony or misdemeanor (except traffic violations) since your last redesignation? If yes, attach a detailed explanation.	☐ YES	□ NO			
Have you been found liable or had a judgment or consent decree entered against you in civil court related to any business or professional matter or in any other civil case (with the exception of any domestic or family law, e.g., divorce or child custody)? If yes, attach a detailed explanation and include a copy of the judgment against you.	☐ YES	□ NO			

CONTINUED ON NEXT PAGE

	Have you ever been convicted of fraud, misrepresentation, misappropriation of funds or property? If yes, attach a detailed explanation.	☐ YES	□ NO							
	Do you know of any reason why you would be unable to obtain bonding? If yes, attach a detailed explanation.	☐ YES	□ NO							
	Have you been subject to disciplinary action by any professional organization? If yes, attach a detailed explanation.	☐ YES	□ NO							
Pl	Please read the following before signing below.									
	I of the information provided by me is complete and correct to the best of my knowledge and belief. If I made , at any time, make any statement with knowledge of its falsity, I understand that it shall be cause for revocation my designation. I shall conduct myself in accordance with the CAI Professional Manager Code of Ethics and shall be bund by the bylaws and regulations of CAI as they are now or as they may be amended from time to time.									
	aive and forever release all claims and demands, or causes of action that I may have now or may in the future e against CAI, its members, Trustees, officers, and employees, for any act or omission of CAI, it members, Trust, officers, and employees in awarding the AMS designation, failing to award the AMS designation, or in censursuspending, or revoking the PCAM designation.									
	nations Department by providing a written statement and detailed explanation within 30 day	any circumstance changes my answer to any of the questions above, I will notify CAI Education/Desigepartment by providing a written statement and detailed explanation within 30 days. I will address the and detailed explanation to: CAI Designations Department, 6402 Arlington Blvd., Suite 500, Falls Church or info@caionline.org.								