CCMP Application Template

We are so glad you have chosen to pursue the CCMP certification!

We strongly recommend that before you begin the online application, you prepare your responses using this template to ensure you meet all of the criteria. This template lists all of the fields you will be required to complete online. It will help ensure you meet all of the criteria before beginning the process. For a quick check of whether you have sufficient change management experience and training hours, use the second tab: **B. Eligibility Check** to enter hours - the built in formulas will add up the results.

Template Notes and Tips
1. The **left column** (B) below lists the requirements from the online application form.
2. The **right column** (C) is where you enter your responses. *Overwrite* the text in the right column (*'text box', 'MM/DD/YYYY', etc.*), **except** where recommended that you use a word processor to manage word or character counts.
3. When you click in a response field in the right column, a **message box** will appear to provide you with guidance and tips on completing the field.
4. Some response fields have a dropdown list (blue text).
   ● When you click on a list, a small arrow icon will appear next to the field on the right.
   ● Click the arrow, use the vertical search bar to scroll through the choices. Select your response by clicking on it.

The application has 7 sections:
   1. Personal Information
   2. Education
   3. Experience
   4. Change Management Training
   5. Experience Essay Questions
   6. Statement of Understanding
   7. Payment

Sections 1 through 4 and section 6 are covered in this template.

Help
This template is offered as a tool for your use. ACMP does not offer any support for it's use. If you have questions about particular fields, please refer to the FAQ section of www.myccmp.org or the Candidate Handbook (once released) for assistance.

Section 1: Personal Information

You will be asked to fill out your personal information. Fields with an asterisk (*) are mandatory.
If you are already an ACMP member, your personal data will automatically be populated.

First Name *	Text box
Last Name *	Text box
Email Address *	Text box
Phone *	Text box
Address Line 1 *	Text box
Address Line 2	Text box
City *	Text box
State (Province) *	Text box
Zip/Postal Code *	Text box
Country *	Text box
Name as you would like it to appear on your certificate *	Text box
Current Organization *	Text box
Job Title *	Text box
Industry in which you work	Choose the industry in which you work from the dropdown list.
Primary region in which your work	Choose the region in which you work from the list.
Date of Birth (MM/DD/YYYY) *	MM/DD/YYYY
List degrees, certificates and credentials you hold (separate with commas)	Text box

Section 2: Education Information

CCMP requires completion of a 4-year degree (or international equivalent) or Secondary education (high school or international equivalent). For more information about the education requirements click the link below. Details about international equivalents are near the bottom of the page.

Click here for education requirements.	URL for Education Requirements: http://www.myccmp.org/faqs/2015/12/2/requirements-to-apply-for-ccmp
Which level of education have you completed? * (Select one)	○ 4-year degree / international equivalent ◉ Secondary education / international equivalent
Enter the name of the school that granted your degree *	Text box

Choose the degree/ international equivalent from the dropdown list *	Choose your level of education from the dropdown list.
Enter name/title of the highest level of education completed *	Text box
Academic Completion Date (MM/DD/YYYY) *	MM/DD/YYYY

Section 3: Change Management Experience

In this section you will enter details about your work experience.

- If you have the equivalent of a **4-year degree or greater**, you need **4200 hours** of change management experience.
- If your highest level of education is **Secondary education (high school or equivalent)**, you need **7000 hours** of change management experience.

You can describe as many work experiences as needed to add up to the minimum required number of hours. We have provided space for up to 6 experiences in this template. Only include as much as is needed to reach the required number of hours.

[Click here for more information about qualifying experience.](#)

URL for qualifying experience:
http://www.myccmp.org/faqs/2015/12/2/requirements-to-apply-for-ccmp

Experience Entry #1

Experience Name *	Text box
Your Role *	Choose your project role for this experience from the dropdown list.
If Other selected above, identify your role	Text box
Start Date (MM/DD/YYYY) *	MM/DD/YYYY
End Date (MM/DD/YYYY) *	MM/DD/YYYY
Change Mgt hours worked *	Number
Organization Name *	Text box
Summary of what you did * **Tip:** It is easier to use a word processing program to draft your answer rather than using this Excel template. Check the number of characters to make sure your answer does not have more than 1000 characters.	Text box, max length: 1000 characters

Experience Entry #2

Experience Name *	Text box
Your Role *	Choose your project role for this experience from the dropdown list.
If Other selected above, identify your role	Text box
Start Date (MM/DD/YYYY) *	MM/DD/YYYY
End Date (MM/DD/YYYY) *	MM/DD/YYYY
Change Mgt hours worked *	Number
Organization Name *	Text box

Summary of what you did *	Text box, max length: 1000 characters
Tip: It is easier to use a word processing program to draft your answer rather than using this Excel template. Check the number of characters to make sure your answer does not have more than 1000 characters.	

Experience Entry #3

Experience Name *	Text box
Your Role *	Choose your project role for this experience from the dropdown list.
If Other selected above, identify your role	Text box
Start Date (MM/DD/YYYY) *	MM/DD/YYYY
End Date (MM/DD/YYYY) *	MM/DD/YYYY
Change Mgt hours worked *	Number
Organization Name *	Text box
Summary of what you did * **Tip:** It is easier to use a word processing program to draft your answer rather than using this Excel template. Check the number of characters to make sure your answer does not have more than 1000 characters.	Text box, max length: 1000 characters

Experience Entry #4

Experience Name *	Text box
Your Role *	Choose your project role for this experience from the dropdown list.
If Other selected above, identify your role	Text box
Start Date (MM/DD/YYYY) *	MM/DD/YYYY
End Date (MM/DD/YYYY) *	MM/DD/YYYY
Change Mgt hours worked *	Number
Organization Name *	Text box
Summary of what you did * **Tip:** It is easier to use a word processing program to draft your answer rather than using this Excel template. Check the number of characters to make sure your answer does not have more than 1000 characters.	Text box, max length: 1000 characters

Experience Entry #5

Experience Name *	Text box
Your Role *	Choose your project role for this experience from the dropdown list.
If Other selected above, identify your role	Text box

Start Date (MM/DD/YYYY) *	MM/DD/YYYY
End Date (MM/DD/YYYY) *	MM/DD/YYYY
Change Mgt hours worked *	Number
Organization Name *	Text box

Summary of what you did * **Tip:** It is easier to use a word processing program to draft your answer rather than using this Excel template. Check the number of characters to make sure your answer does not have more than 1000 characters.	Text box, max length: 1000 characters

Experience Entry #6

Experience Name *	Text box
Your Role *	Choose your project role for this experience from the dropdown list.
If Other selected above, identify your role	Text box
Start Date (MM/DD/YYYY) *	MM/DD/YYYY
End Date (MM/DD/YYYY) *	MM/DD/YYYY
Change Mgt hours worked *	Number
Organization Name *	Text box
Summary of what you did * **Tip:** It is easier to use a word processing program to draft your answer rather than using this Excel template. Check the number of characters to make sure your answer does not have more than 1000 characters.	Text box, max length: 1000 characters

Section 4: Change Management Training

CCMP requires completion of 21 hours of instructor-led change management training in the 7 years prior to application. Courses must be aligned with **The Standard for Change Management** (The Standard). Training taken with an ACMP Qualified Education Provider (QEP) is considered aligned with The Standard.

Courses taken with non-QEP providers are eligible if you provide evidence that the course material was in agreement with at least a portion of The Standard. You can upload one document for each course including a combination of the course description, outline, and learning objectives to support your submission.

You can describe as many courses as needed to add up to the minimum required number of hours. We have provided space for up to 3 courses in this template. Only include as many courses as is needed to reach the required number of hours.

Click here for more information.

URL for change management training:
http://www.myccmp.org/faqs/2015/12/2/training

Training Entry #1

Training Type *	◉ Classroom ○ Online, led by an instructor
Training Provider *	Text box
If you selected Other (non-QEP), identify **training provider**	Text box
If you selected Other (non-QEP), identify the **course title**	Text box
Course Start (MM/DD/YYYY) *	MM/DD/YYYY
Course End (MM/DD/YYYY) *	MM/DD/YYYY
Instructional Hours *	Number of instructional hours
For non-QEP courses, attach a document including course description, outline and objectives.	If you are submitting a non-QEP courses, prepare your upload by: (1) Creating a separate document that includes course name, description, outline, learning objectives. You can copy and paste text or include screenshots/photos. (2) Name the file with the following format: **Your Name Non-QEP Company Name**. Example: **F Jones ABC Training Inc.**

Training Entry #2

Training Type *	◉ Classroom ○ Online, led by an instructor
Training Provider *	Text box
If you selected Other (non-QEP), identify **training provider**	Text box
If you selected Other (non-QEP), identify the **course title**	Text box
Course Start (MM/DD/YYYY) *	MM/DD/YYYY
Course End (MM/DD/YYYY) *	MM/DD/YYYY
Instructional Hours *	Number of instructional hours
For non-QEP courses, attach a document including course description, outline and objectives.	If you are submitting a non-QEP courses, prepare your upload by: (1) Creating a separate document that includes course name, description, outline, learning objectives. You can copy and paste text or include screenshots/photos. (2) Name the file with the following format: **Your Name Non-QEP Company Name**. Example: **F Jones ABC Training Inc.**

Training Entry #3

Training Type *	◯ Classroom ⦿ Online, led by an instructor
Training Provider *	Text box
If you selected Other (non-QEP), identify **training provider**	Text box
If you selected Other (non-QEP), identify the **course title**	Text box
Course Start (MM/DD/YYYY) *	MM/DD/YYYY
Course End (MM/DD/YYYY) *	MM/DD/YYYY
Instructional Hours *	Number of instructional hours
For non-QEP courses, attach a document including course description, outline and objectives.	If you are submitting a non-QEP courses, prepare your upload by: (1) Creating a separate document that includes course name, description, outline, learning objectives. You can copy and paste text or include screenshots/photos. (2) Name the file with the following format: **Your Name Non-QEP Company Name**. Example: **F Jones ABC Training Inc.**

Section 5: Experience Essay Questions

To proceed to the exam, you must successfully respond to 3 out of an available 5 essay questions. The essay questions will be provided within the application form online.

Review all of the questions and choose 3 that you feel you are best able to answer. Please only respond to 3 questions. Only the first 3 responses will be reviewed.

To do your best, it is recommended that you:
▪ draft your answers in a word processing program and use it to check your word count (up to **500 words for each essay question)**
▪ check your response to ensure you have responded to all parts of the essay question - if your answer is short (less than 100 words) it is likely you have not answered all parts of the question
▪ use your personal experience to respond, adding examples of what you have done where appropriate
▪ write your answers, take a break, then review them again to ensure you are satisfied before pasting the text into this application form

Section 6: Statement of Understanding

It is important that you carefully review the Certified Change Management Professionals (CCMP™) Statement of Understanding <u>before</u> you complete the application process.

Click here to review the Statement of Understanding.

URL for Statement of Understanding:
http://www.myccmp.org/faqs/2016/3/15/ccmp-statement

You are ready to begin!

Step 1 - Enter and calculate your total change management hours for **Section 3: Change Management Experience**.
Caution: If required, add more lines. Just make sure you adjust the calculation formula to capture any lines you add!

#	Change Management Experience	Number of Hours
1		0.0
2		0.0
3		0.0
4		0.0
5		0.0
6		0.0
7		0.0
8		0.0
9		0.0
10		0.0
11		0.0
12		0.0
13		0.0
14		0.0
15		0.0
16		0.0
17		0.0
18		0.0
19		0.0
20		0.0
21		0.0
22		0.0
23		0.0
24		0.0
25		0.0
26		0.0
27		0.0
28		0.0
29		0.0
30		0.0
	Total Hours	**0.00**

Step 2 - Enter details for instructor-led change management training courses. Total course hours must add up to at least 21 hours.
If the courses do not add up to 21 hours, add more lines.

#	Instructor-led Change Management Training	Number of Hours
1		0.0
2		0.0
3		0.0
4		0.0
5		0.0
	Total Hours	**0.00**