



## CRITERIA FOR RECERTIFICATION

### PART A - APPLICANT INFORMATION UPDATE

First Name \_\_\_\_\_ MI \_\_\_\_ Last Name \_\_\_\_\_ Job Title \_\_\_\_\_  
Organization \_\_\_\_\_  
Work Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Work Telephone \_\_\_\_\_ Work Fax \_\_\_\_\_  
Work E-mail Address \_\_\_\_\_  
Home Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Telephone \_\_\_\_\_ Home Fax \_\_\_\_\_  
Home E-mail Address \_\_\_\_\_  
IPMA-HR Certified Professional (IPMA-CP): \_\_\_\_\_ IPMA-HR Certified Specialist (IPMA-CS): \_\_\_\_\_

### PART B - EXPLANATION OF RECERTIFICATION

The International Public Management Association for Human Resources has identified several areas of continuing education and leadership activity through which certification may be maintained. Given the rapidly changing environment of public human resource management, continual professional development activities are essential. To retain the International Public Management Association for Human Resources Certified Professional (IPMA-CP) and the Certified Specialist (IPMA-CS) designations, an individual must accumulate 50 points every three years and submit a completed Criteria for Recertification Report Form for each designation. You may begin earning points toward recertification immediately upon receiving your initial IPMA-CP/IPMA-CS designation. Points cannot be carried over for a future recertification.

### PART C - PROFESSIONAL DEVELOPMENT PROGRAMS

#### **5 POINTS PER PROGRAM:**

Participation in multi-day human resource professional development programs.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

Program Subtotal \_\_\_\_\_ Pts.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

Program Subtotal \_\_\_\_\_ Pts.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

Program Subtotal \_\_\_\_\_ Pts.

**3 POINTS PER PROGRAM:**

Participation in human resource professional development programs of at least one day in length.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

Program Subtotal \_\_\_\_\_ Pts.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

Program Subtotal \_\_\_\_\_ Pts.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

Program Subtotal \_\_\_\_\_ Pts.

**1 POINT PER PROGRAM:**

Participation in human resource professional development programs that are less than one day in length.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

\_\_\_\_\_ Pts.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

\_\_\_\_\_ Pts.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

\_\_\_\_\_ Pts.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

\_\_\_\_\_ Pts.

**5 POINTS PER COURSE:**

Participation in human resource courses offered by colleges and universities of at least three credit hours.

Sponsor: \_\_\_\_\_

Date of Program: \_\_\_\_\_

\_\_\_\_\_ Pts.

*Additional pages may be added if needed.*

**Part C Subtotal**

\_\_\_\_\_ Pts.

**PART D - MEMBERSHIP**

**2 POINTS/YEAR (Maximum of 6 points):**

Membership in IPMA-HR since your initial certification or most recent recertification:

Indicate years of membership by year \_\_\_\_\_ = \_\_\_\_\_ Pts.

**1 POINT/YEAR (Maximum of 3 points):**

Membership in an IPMA-HR Section since your initial certification or most recent recertification:

Indicate years of membership by year \_\_\_\_\_ = \_\_\_\_\_ Pts.

**1 POINT/YEAR (Maximum of 3 points):**

Membership in an IPMA-HR Chapter since your initial certification or most recent recertification:

Indicate years of membership by year \_\_\_\_\_ = \_\_\_\_\_ Pts.

**1 POINT/YEAR (Maximum of 3 points per association):**

Membership in another national human resource association such as the Society for Human Resource Management, WorldatWork, American Society for Training and Development, National Public Employer

Labor Relations Association since your certification or recertification: Indicate name of organization and years of membership:

\_\_\_\_\_ = \_\_\_\_\_ Pts.

**Part D Subtotal**

\_\_\_\_\_ Pts.

**PART E - SERVICE IN A LEADERSHIP CAPACITY IN IPMA-HR, AN IPMA-HR REGION, CHAPTER, OR SECTION OR A NATIONAL/STATE HUMAN RESOURCE ASSOCIATION**

**3 POINTS/YEAR:**

For each year served on the IPMA-HR Executive Council, an IPMA-HR Regional Board of Directors, the Board of Directors of an IPMA-HR Section, the Board of Directors of an IPMA-HR chapter, the Board of Directors of a national or state human resource association.

Office or position held: \_\_\_\_\_ = \_\_\_\_\_ Pts.

Organization: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

**2 POINTS/YEAR:**

For each year as chair of an IPMA-HR national committee or as chair of a committee of a national or state human resource association.

Office or position held: \_\_\_\_\_ = \_\_\_\_\_ Pts.

Organization: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

**1 POINT/YEAR:**

For each year as a member of an IPMA-HR national committee or a committee of a national or state human resource association.

Office or position held: \_\_\_\_\_ = \_\_\_\_\_ Pts.

Organization: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

Office or position held: \_\_\_\_\_ = \_\_\_\_\_ Pts.

Organization: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

Office or position held: \_\_\_\_\_ = \_\_\_\_\_ Pts.

Organization: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

**1 POINT/REVIEW/PROCTOR AN EXAMINATION:**

For each set of certification applications you review as a member of the reviewer panel and/or proctor an examination.

= \_\_\_\_\_ Pts.

**5 POINT/TESTING ALTERNATE CERTIFICATION EXAMINATION:**

Participation in testing the new items and ensuring the equivalency of the two forms of the examination.

= \_\_\_\_\_ Pts.

**1 POINT/YEAR:**

For each year as chair of an IPMA-HR chapter/region/section committee.

Office or position held: \_\_\_\_\_ = \_\_\_\_\_ Pts.  
Organization: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

Office or position held: \_\_\_\_\_ = \_\_\_\_\_ Pts.  
Organization: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

Office or position held: \_\_\_\_\_ = \_\_\_\_\_ Pts.  
Organization: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

*Additional pages may be added if needed.*

**Part E Subtotal** \_\_\_\_\_ Pts.

**PART F - PRESENTATIONS AND INSTRUCTION**

**2 POINTS FOR EACH SPEECH:**

Speeches on human resource management

Name of Program: \_\_\_\_\_ Sponsor: \_\_\_\_\_  
Presentation Topic: \_\_\_\_\_ = \_\_\_\_\_ Pts.

Name of Program: \_\_\_\_\_ Sponsor: \_\_\_\_\_  
Presentation Topic: \_\_\_\_\_ = \_\_\_\_\_ Pts.

Name of Program: \_\_\_\_\_ Sponsor: \_\_\_\_\_  
Presentation Topic: \_\_\_\_\_ = \_\_\_\_\_ Pts.

**5 POINTS FOR EACH DAY OF INSTRUCTION:**

Serving as an instructor for a full day or multi-day course on human resource management.

Name of Program: \_\_\_\_\_ Sponsor: \_\_\_\_\_  
Presentation Topic: \_\_\_\_\_ = \_\_\_\_\_ Pts.

Name of Program: \_\_\_\_\_ Sponsor: \_\_\_\_\_  
Presentation Topic: \_\_\_\_\_ = \_\_\_\_\_ Pts.

*Additional pages may be added if needed.*

**Part F Subtotal** \_\_\_\_\_ Pts.

**PART G - PUBLICATIONS**

**5 POINTS PER ARTICLE:**

Having a research article published on human resource management in a professional journal such as *Public Personnel Management*

Article Title: \_\_\_\_\_ Publication: \_\_\_\_\_ Date \_\_\_\_\_

Article Title: \_\_\_\_\_ Publication: \_\_\_\_\_ Date \_\_\_\_\_

Article Title: \_\_\_\_\_ Publication: \_\_\_\_\_ Date \_\_\_\_\_

**2 POINTS FOR EACH ARTICLE:**

Having an article published on human resource management in a newsletter.

Article Title: \_\_\_\_\_ Publication: \_\_\_\_\_ Date \_\_\_\_\_

Article Title: \_\_\_\_\_ Publication: \_\_\_\_\_ Date \_\_\_\_\_

*Additional pages may be added if needed.*

**Part G Subtotal** \_\_\_\_\_ Pts.

**PART H – EXPERIENTIAL LEARNING**

One point per year up to a maximum of three points for continuous employment in a direct human resource capacity since you were certified or recertified.

Indicate HR employment by year \_\_\_\_\_ = \_\_\_\_\_ Pts.

**Part H Subtotal** \_\_\_\_\_ Pts.

**PART I - HUMAN RESOURCE INNOVATIONS**

**5 POINTS:**

Implementing an innovative human resource management program.

Please describe the innovation in a maximum of one page that should be attached to your application \_\_\_\_\_

**PART J – POLICY/PROGRAM/RFP/SUCCESSFUL PRACTICE WEBSITE SUBMISSION**

**1 POINT:**

One point per submission of a policy, program, RFP or successful practice to the IPMA-HR website \_\_\_\_\_

**Part C Subtotal** \_\_\_\_\_

**Part D - J Subtotal** \_\_\_\_\_

**Grand Total (must equal 50 points)** \_\_\_\_\_

**APPLICANT’S DECLARATION**

I declare that all of the information contained in this form is accurate. I give the International Public Management Association for Human Resources permission to verify the information contained in this application. I authorize organizations referenced by me to release participation information. I understand that if any of the information contained in this application is false, IPMA-HR has the right to reject my application.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PAYMENT INFORMATION**

IPMA-HR Member Recertification Fee: \$125.00 IPMA-HR Non-member Recertification Fee: \$175.00

\_\_\_ My check is for \$ \_\_\_\_\_ is enclosed, payable to IPMA-HR.

\_\_\_ Please charge \$ \_\_\_\_\_ to my: \_\_\_ Mastercard \_\_\_ Visa

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature (required): \_\_\_\_\_

**MAIL THIS FORM TO:**

**IPMA-HR RE-CERTIFICATION - 1617 DUKE STREET - ALEXANDRIA, VA 22314 - FAX: (703) 684-0948**