

CAI Retired Professional Credential Application

The CAI retired professional application is offered to active CAI credential holders in good stating who are fully retired from the industry. It allows designees to continue to be recognized for achieving their CAI credentials after leaving the industry.

A designee with a retired status does not need to meet the education redesignation requirements like those with active status, as the education may no longer provide value to a designee who has retired.

Retired status designees are not entitled to use or hold themselves out to the public as an active designee. Designees who qualify for retired status may use the designation followed by "-Retired" after their name to indicate their status. For example, John Smith, PCAM-Retired., which signifies a retired status PCAM designation.

The maintenance fee for retired status will be due every year on August 1: AMS — $$35 \mid LSM = $25 \mid PCAM = $50 \mid RS = $55 \mid CIRMS = 40

Application Instructions

- Fill in this application with Adobe Acrobat Reader or print clearly in ink. To work in Reader: save the file on your computer, complete the form using your keyboard, and save again using your last name in the filename (e.g., PCAM_Jones.pdf) before printing. If additional pages are needed, please label clearly and attach to this application.
- Submit completed application to CAI Headquarters, 6402 Arlington Blvd., Suite 500, Falls Church, VA 22042, fax to (703) 970-9558, or e-mail to caieducation@caionline.org.

I. Candidate Information

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LAST NAME AND SUFFIX		1 1		1 1	1 1					
HOME ADDRESS										
CITY						▼ STAT		▼ ZIP		
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PREFERRED E-MAIL ADDRESS										
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HOME PHONE		▼	MOBILE PH	ONE			•			
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ase check at least one CAI c	edential	in whic	h you a	re appl	ying fo	r reti i	red s	tatus:		
AMS: CERTIFICATE NUMBER	☐ LSI	M: CERTIFI	CATE NUM	BER		☐ PC	AM: CE	RTIFICAT	ΓΕ NUM	IBER
¬	☐ CIF	RMS: CERT	IFICATE NU	IMBER						
RS: CERTIFICATE NUMBER										

I attest that I have fully retired from the industry and do not intend to return or consult. I understand that I am subject to all eligibility requirements for program participation as described below. By signing below, I acknowledge the following:

I have a current, unencumbered CAI credential at the time of application/retirement.

I am retiring and will no longer practice in my specialty or industry, this includes self-employment as an independent contractor or consultant.

If approved, I will be permitted to use the word "Retired" after my CAI credentials only for personal use. I asset my CAI credential has not been revoked or restricted in anyway.

I understand a credential can be reactivated within five years from the date retired status was conferred onto my credential. There is no opportunity to reactivate a retired credential after five years without restarting the application process entirely and meeting the current requirements for that credential.

I will continue to adhere to the same CAI Professional Code of Ethics as active designees and may be subject to revocation in the event of a policy violation.

I understand that CAI reserves the right to update program requirements and the Professional Code of Ethics, and that it is my responsibility to be aware of the current requirements.

I further affirm that the statements and information set herein this application are true and correct, and that any falsification or willful misstatements or omissions intended to mislead will forfeit my right to CAI credentials.

I agree that in order to maintain my CAI retired credential, I will pay the annual maintenance fee listed above.

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? <i>If yes, attach a detailed explanation</i> .	☐ 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
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

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Please read the following before signing below.

All of the information provided by me is complete and correct to the best of my knowledge and belief. If I made or, at any time, make any statement with knowledge of its falsity, I understand that it shall be cause for revocation of my designation. I shall conduct myself in accordance with the CAI Professional Code of Ethics and shall be bound by the bylaws and regulations of CAI as they are now or as they may be amended from time to time.

I waive and forever release all claims and demands, or causes of action that I may have now or may in the future have against CAI, its members, Trustees, officers, and employees, for any act or omission of CAI, it members, Trustees, officers, and employees in censuring, suspending, or revoking the above listed designations.

Further, if any circumstance changes my answer to any of the questions above, I will notify CAI Education/ Designations Department by providing a written statement and detailed explanation within 30 days. I will address the statement and detailed explanation to: CAI Designations Department, 6402 Arlington Blvd., Suite 500, Falls Church, VA 22042 or info@caionline.org.

SIGNATURE DATE

