

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 hour totals in the right column.

Submit completed form to the CAI headquarters office, 6402 Arlington Blvd., Suite 500, Falls Church, VA 22042, or e-mail to caieducation@caionline.org. Form is due by the August deadline indicated in the My Designations section of your account. No fee is required with this form, as it is billed separately. For further information please contact (888) 224-4321.

I. Designee Information

▼ CAI MEMBER NUMBER	▼ AMS NUMBER	
<input type="text"/>	<input type="text"/>	
▼ FIRST NAME AND MIDDLE INITIAL		
<input type="text"/>		
▼ LAST NAME AND SUFFIX		
<input type="text"/>		
▼ HOME ADDRESS		
<input type="text"/>		
▼ CITY	▼ STATE	▼ ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>
▼ FIRM/ASSOCIATION		
<input type="text"/>		
▼ BUSINESS ADDRESS		
<input type="text"/>		
▼ CITY	▼ STATE	▼ ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>
▼ PREFERRED E-MAIL ADDRESS		
<input type="text"/>		
▼ HOME PHONE	▼ MOBILE PHONE	
<input type="text"/>	<input type="text"/>	
▼ BUSINESS PHONE		
<input type="text"/>		

II. Continuing Education

AMS designees are required to provide proof of continuing education every three years of one CAI course (M-200 level or above)

REQUIRED | One CAI course (M-200 level or above)

COURSE NUMBER

In addition, AMS redesignation requires **eight hours** of **other** industry related education, which can be any education that is used in your day to day position as a community association manager (**some** examples are listed below.) An additional CAI course **can** be used; please list both numbers above.

CAI Chapter Program—Hours calculated on advertised length of program. Attach documentation (Chapter Participant Verification Form, certificate, transcript, etc.)

HOURS

Virginia Leadership Retreat

8 hours

HOURS

CAI Headquarters Annual Conference

15 hours

HOURS

CEO-MC Retreat

12 hours

HOURS

CAI Headquarters Law Seminar

12 hours

HOURS

Large-Scale Managers Workshop

12 hours

HOURS

High-Rise Managers Workshop

12 hours

HOURS

Approved courses for state Manager Licensing Renewal Requirements—

Hours calculated on state approved hours. Attach a copy of completion certificate.

HOURS

CertainTeed online programs—2 hours. Must attach completion certificate (<http://continuinged.certainteed.com>)

HOURS

CAI headquarters webinars

Please visit www.caionline.org/webinars for details

HOURS

Other Industry-related programs (please list and attach documentation)

HOURS

TOTAL

CONTINUED ON NEXT PAGE

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, 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

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 Manager 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, its members, Trustees, officers, and employees in awarding the AMS designation, failing to award the AMS designation, or in censuring, suspending, or revoking the PCAM designation.

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

SIGNATURE

DATE