



The Essential Credential™

# APPLICATION

This application is the first step toward earning the Certified Manager of Community Associations (CMCA<sup>®</sup>) credential. The CMCA is the only international certification program designed exclusively for managers of homeowner and condominium associations and cooperatives. The CMCA is an entry-level credential that recognizes individuals who have demonstrated the fundamental knowledge required to manage community associations. Please read and complete each section fully and accurately in clear, legible handwriting or type.

Name

Please mail, fax or email completed application to:

CAMICB 6402 Arlington Blvd, Suite 510 Falls Church, VA 22042 Toll Free: 866-779-CMCA Main: 703-970-9300 Fax: 1-800-845-4394 Email: cmca@camicb.org

Receipt of your application will be acknowledged within three weeks.



## **APPLICANT INFORMATION**

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APPLICANT NAME (name must match your governmen	t-issued photo ID)	
Mr.      Mrs.      Ms. First	Middle	Last
HOME ADDRESS		
City	State	Zip
Phone		🗆 Home 🗆 Cellular 🗆 Business
Email		
EMOGRAPHIC INFORMATION		
Completion of the Demographic Information section is o understand the needs of the community association ma	•	cts demographic information to better
Birth year:		
Start date in the industry (year):		
Highest level of education attained:	ee 🛛 Master's degree	e 🛛 Doctorate degree
<b>Type of manager (select all that apply):</b> Assistant  High Rise  Large-Scale  On-Si	ite 🗌 Portfolio	
Type of communities managed (select all that apply):		
□ Large-scale (more than 1,000 homes or acres)	□ Townhous	
□ Garden-style condominium ( <i>3 or fewer stories)</i> □ Mid-rise condominium ( <i>4-6 stories</i> )	Commerci     Mixed use	-
☐ High-rise condominium ( <i>4-0 stories</i> )	Rental	
□ Single family	□ Other	

## **CMCA EXAMINATION DETAILS**

The CMCA examination consists of 120 multiple-choice questions. Candidates have up to 2.5 hours (150 minutes) to complete the exam. Exam results are provided immediately after testing. The examination is administered as a computer-based test by Pearson VUE, a leading provider of computer-based certification examinations around the world. Approval of your exam application and payment are required before you can schedule a CMCA exam appointment.

CMCA candidates are given twelve months to schedule their appointment and complete the exam at a Pearson VUE testing center. You will forfeit your fees if you do not take the exam during your twelve-month eligibility period. The eligibility period will not be extended. When your CMCA Application is approved, you will receive a CMCA Authorization to Test email that will provide instructions to schedule your exam appointment. At that time, you will be able to select the date, time, and testing center location for your appointment. The Authorization to Test email will also provide details about available exam preparation resources, all of which can be found on <u>camicb.org</u>.



#### PREREQUISITE REQUIREMENT

#### Candidates must complete one of the following prerequisite requirements:

**Educational Requirement:** Satisfactory completion of <u>one</u> prerequisite course. Please complete the information below and attach the certificate of completion to the application.

□ I passed the *M100: The Essentials of Community Association Management* from Community Associations Institute. Date: \_\_\_\_\_\_ Location: \_\_\_\_\_\_

□ I passed the *Community Association Manager Class: Love Thy Neighbor* from Lazega & Johanson, LLC/Capitus Real Estate Learning Center

Date: \_\_\_\_\_ Location: \_\_\_\_\_

□ I passed the *Community Association Management Pre-License Course* from Weissman, Nowack, Curry & Wilco, PC. Date: \_\_\_\_\_\_ Location: \_\_\_\_\_\_

#### OR

Experience Requirement: If you have at least two years' experience as a community association manager, you may receive a one-time prerequisite waiver. The experience must be as a community association manager – not as an assistant manager. *If you do not pass the exam the first time, you will be required to fulfill a different prerequisite option prior to retaking the exam*. Please list the relevant experience below (use additional pages as needed).

Organization Name:	
Supervisor Name:	
Supervisor Phone/Email:	
Job Title:	
Description of Responsibilities:	
Dates of Employment:	
Organization Name:	
Supervisor Name:	
Supervisor Phone/Email:	
Job Title:	
Description of Responsibilities:	
Dates of Employment:	

#### OR

License or Credential Requirement: If you hold at least one of the following licenses or credentials (must be active and in good standing), the educational requirement is waived. Provide the license number below:

Arizona California Florida Illinois Nevada	Certified Arizona Association Manager (CAAM) Certified Community Association Manager (CCAM) Community Association Manager License (FLCAM) Community Association Manager License (ILCAM)	#: #: #: #:
Nevada	Community Association Manager License (NVCAM)	#:



## AGREEMENT AND COMPLIANCE

The applicant has the responsibility to read, understand and comply with all aspects of the certification program as outlined in the <u>CMCA Handbook</u>. Read each policy carefully and attest to understanding these requirements by signature below. I hereby apply for the CMCA credential. I understand that earning this credential depends on the successful completion of specific requirements and that the following policies apply:

- 1. I have read and understand the information contained in the CMCA Handbook.
- 2. To the best of my knowledge, the information in this application is correct and complete.
- 3. I acknowledge that CAMICB reserves the right to verify information on this application.
- 4. I have read and agree to abide by the CMCA Standards of Professional Conduct. I understand that alleged violations of the Standards, including incorrect, fraudulent or misleading information on this application, may prompt a review under CAMICB administrative procedures. I will cooperate fully with any disciplinary investigation.
- 5. I agree to comply with the certification requirements and to supply any information needed for the assessment as well as any information needed to demonstrate objective compliance with the prerequisite requirements.
- 6. I acknowledge that the information accrued in the credentialing process may be used for statistical or other purposes by CAMICB. My records will be treated confidentially, except as otherwise provided by law.
- 7. I recognize that the CMCA examination questions are the property of CAMICB and will not be available to me outside of a secure testing environment.
- 8. I will not release confidential examination materials or participate in fraudulent test-taking practices. CAMICB reserves the right to withhold or cancel my scores or revoke certification if there is any evidence of cheating, improper conduct or other irregularities.
- 9. I acknowledge that CMCA examination fees are nonrefundable and nontransferable. Examination extensions will not be given beyond the one-year period of eligibility to test.
- I accept the responsibility to provide my current contact information (including full name, mailing address, email address, and telephone number) to the CAMICB office, update it as required, and review it at least once annually. I must inform CAMICB of matters that can affect my capability to continue to fulfill the certification requirements.
- 11. In the event my CMCA credential is suspended, I will refrain from further promotion of the credential during the period of suspension. In the event of withdrawal or revocation of my CMCA, I will refrain from use of all references to a certified status. I will return any certificates issued by CAMICB if requested.
- 12. I will not use the CMCA in such a manner as to bring CAMICB into disrepute and may not make any statement regarding the credential which CAMICB considers misleading or unauthorized. I will make claims regarding the CMCA only with respect to the scope for which the CMCA has been granted and will not use the CMCA credential in a misleading manner.
- 13. At the time of this application, I will disclose any history of felony or misdemeanor conviction for criminal activity including but not limited to crimes of a fiduciary nature such as embezzlement, forgery, fraud, or theft. I will disclose if I have had a license, certification, registration or permit to practice any regulated profession revoked, suspended, relinquished, or withdrawn. I acknowledge that CAMICB reserves the right but not the obligation to review a criminal conviction or professional disciplinary action of any nature, within any timeframe, and to deny eligibility to test.
- 14. If any circumstance changes my answer to any of the questions on this application, including but not limited to a conviction, entry of a plea of *nolo contendre* in a felony case, or revocation of a state or professional credential or license, I will notify CAMICB by providing a written statement within 30 days of the event in question.

Signature of Applicant:	Date:	
Print Name:	-	



## SUBMISSION OF SUPPORTING DOCUMENTATION

If you have ever been convicted of a felony or misdemeanor or have experienced a sanction of a professional license, certification, registration, or permit (as referenced in item 13 of the Statements of Understanding), you are required to disclose this history to CAMICB at the time of application submission. Please submit your CMCA Application with an attached personal statement concerning the circumstances of the offense or disciplinary action and any additional supporting documentation such as court documents, if applicable.

A history of criminal conviction or sanction of a professional credential or license does not automatically disqualify a candidate from approval to take the CMCA exam. Applications are evaluated on a case-by-case basis to determine if the offense violates CAMICB's policies. Eligibility to test may be denied or withdrawn. An applicant who is denied the opportunity to test because of this review may request reconsideration of the decision.

Failure to disclose a history of conviction or sanction of a professional credential or license may be grounds for permanent revocation of the CMCA credential or authorization to test.

#### **REQUESTING SPECIAL TESTING ACCOMMODATIONS**

CAMICB abides by all applicable federal and state statutes relating to the accommodation of disabled individuals. If you have special needs that require an accommodation for the CMCA examination, please complete the CMCA Accommodations Request Form and submit it with the CMCA Application. You can download the CMCA Accommodations Request Form from camicb.org or contact info@camicb.org to request a copy.

Candidates who have requested special testing accommodations should not schedule an appointment to take the examination until receiving written confirmation of the accommodations.

#### STATE-SPECIFIC REQUIREMENTS

The states below have passed laws and regulations governing the practice of community association management. The CMCA meets the requirements set forth by several of the states. If you intend to practice community association management in any of the below states, CAMICB recommends that you familiarize yourself with the relevant laws.

Alaska	California *	Connecticut	Florida
Georgia	Illinois **	Nevada	Virginia

Visit <u>camicb.org</u> for additional information about licensing and registration requirements.

\* California has developed unique laws relating to community associations. The state requires that managers practicing in California must demonstrate they have completed **30 hours** of coursework relating to community association operations. Managers must also take a law course that complies with the California Manager Certification Titling Act.

\*\* Illinois requires managers to hold a professional license. Applicants can establish eligibility for the license by passing the CMCA examination. Illinois requires that 20 hours of pre-license education in community association management must have been completed within the **24-month** period prior to taking the exam. Learn more at <u>idfpr.illinois.gov</u>.

#### DIRECTORY OF CREDENTIALED PROFESSIONALS

Upon earning the CMCA, your name will be added to the CMCA Directory of Credentialed Professionals at <u>camicb.org</u>. The Directory allows employers and members of the public to find the contact information, certification status, and geographic location of a CMCA-credentialed manager. If you do not want to be listed, please indicate below:

 $\Box$  I do not want to be listed in the online Directory of Credentialed Professionals.



## **APPLICATION FEE PAYMENT**

The fee to apply for the CMCA examination is <u>\$360</u>. *Application fees are nonrefundable and nontransferable*.

Candidate Name:		
Phone Number:		·

## PAYMENT METHOD

Amount: \$360				
CHECK (payable to C	AMICB)	Check Number:		
CREDIT CARD:	🗆 Visa	□ MasterCard	□ Discover	□ American Express
Card Number:				
Expiration Date:				
Name of Cardholder:				
Signature:				

Failure to submit a complete application with payment will cause delays in the review and processing of your application.

When your application is approved, you will receive a CMCA Authorization to Test (ATT) email that will provide instructions to schedule your examination appointment and will include details about examination preparation resources.

Please mail, fax or email completed application to: **CAMICB** 6402 Arlington Blvd Suite 510 Falls Church, VA 22042 Toll Free: 866-779-CMCA Main: 703-970-9300 Fax: 1-800-845-4394 Email: cmca@camicb.org



## CMCA STANDARDS OF PROFESSIONAL CONDUCT

(Revised October 2024)

A Certified Manager of Community Associations<sup>®</sup> (CMCA) shall:

1. Be knowledgeable, act, and encourage clients to follow all applicable laws and regulations relevant to community association management and operations.

2. Be knowledgeable, comply and encourage clients to comply with the applicable governing documents, policies, and procedures of the Client Association(s) to the extent permitted by that Client.

3. Not knowingly misrepresent material facts, make inaccurate statements or act in any fraudulent manner while representing Client Association(s) or acting as a CMCA.

4. Not provide legal advice to Client Association(s) or any of its members, or otherwise engage in the unlicensed practice of law.

5. Promptly disclose to Client Association(s) any actual or potential conflicts of interest that may involve the manager.

6. Refuse to accept any form of gratuity, compensation, or other remuneration from individuals or companies that may improperly influence the manager's decisions.

7. Participate in continuing professional education and satisfy all requirements to maintain the CMCA.

8. Uphold their fiduciary duty to the Client Association(s) by acting with due diligence, loyalty, and care in all aspects of community management.

9. Conduct themselves with professionalism, integrity, and respect when acting within the scope of their employment and in compliance with applicable laws, rules, and regulations.

10. Recognize the original records, files and books held by the manager are the property of the Client Associations to be returned to the Client at the end of the manager's engagement and maintain the duty of confidentiality to all current and former clients. These materials must be returned to the Client upon request. Maintain confidentiality for all current and former clients and ensure the secure handling of records, including electronic data, in compliance with current data security standards.

A violation of any of these Standards of Professional Conduct may be grounds for administrative action and possible revocation of the CMCA credential by the Community Association Managers International Certification Board (CAMICB).

For additional information to interpret the CMCA Standards of Professional Conduct, please refer to the following Clarification of the CMCA Standards of Professional Conduct document.

These standards are enforced through a process outlined in the CMCA Standards of Professional Conduct Enforcement Procedures. Visit <u>camicb.org</u> or contact the CAMICB office for a copy of the document.