



2017 CFE APPLICATION FORM

Completed application forms and written references must be received by IAVM no later than November 1.

Name: _____
(As you would like it to appear on your plaque)

Venue: _____

Position: _____

Venue Address: _____
Street Address or P.O. Box

City, State/Province, Zip/Postal Code

Home Address: _____
Street Address or P.O. Box

City, State/Province, Zip/Postal Code

Email: _____

Phone: Office: _____ Cell: _____

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To speed the processing of your application, you should submit evidence for the points you claim. The Certification Board may request documentation of any and all claims of points. Any supplemental materials should be labeled clearly and should make reference to the specific section of the application to which they refer. If you cannot provide evidence when it is requested, the Certification Board may, in its sole discretion, decide not to give you credit for unsubstantiated claims.
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MINIMUM CFE REQUIREMENTS – Please answer yes or no to each of the following:

- _____ Minimum of seven years' experience in the top two levels of management.
- _____ Must have a minimum of 300 points for all categories.
- _____ Agree to the IAVM Code of Ethics.
- _____ Acknowledge all information provided is true and valid.

If you answered "no" to any of the above questions, you are not eligible to apply for the CFE.

HIGHER EDUCATION AND PUBLIC ASSEMBLY MANAGEMENT EXPERIENCE _____

This section records your educational achievement in college credit (*not* continuing education) course work at a college or university accredited by regional or national college accrediting bodies. Please include copies of diplomas or final transcripts.

You should write in the number of points shown only for the *highest* degree you have earned. For instance, if you hold both an associate's degree and a bachelor's degree, you have earned 30 points, *not* 45 points. Graduate Study is defined as higher education (master's level or higher) that does not culminate in a terminal degree. If you do not have a bachelor's degree, you may earn points for each semester hour completed.

<i>Degree</i>	<i>Institution</i>	<i>Year</i>	<i>Point Calculation</i>	<i>Points</i>
Ph.D.	_____	_____	(50 points)	_____
Master's Degree	_____	_____	(40 points)	_____
Bachelor's Degree	_____	_____	(30 points)	_____
Associate's or TAFE Degree	_____	_____	(15 points)	_____
Undergraduate Study-not leading to a degree	_____	_____	(1 pt./3 semester hours)	_____
Graduate Study-not leading to a degree	_____	_____	(2 pt./3 semester hours)	_____

Secondly, facility management experience must be a minimum of seven years in the top two levels of a public assembly facility's management structure. *Top two levels* of organization structure include 1) Principal executive responsible for day-to-day operation of a facility, group of facilities, or one facility within a complex; or 2) second-level management executives who directly report to the principal executive responsible for the day-to-day operation of a facility, group of facilities, or one facility within a complex and who themselves are responsible for day-to-day operations. Evidence of work experience should include *copies of job descriptions and organization charts*. Public assembly facilities are arenas, stadiums, auditoriums, exhibit halls, convention centers, performing arts theaters or amphitheatres.

MANAGEMENT EXPERIENCE:

<i>Facility</i>	<i>Location</i>	<i>Position</i>	<i>Dates (Month/Year–Month/Year)</i>	<i>Points (1 per month)</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL HIGHER EDUC. & MGMT. EXPERIENCE PTS. (240 maximum, 114 minimum) _____

CERTIFICATION _____

This Section records professional certifications you have earned, such as CPA (Certified Public Accountant) or CFE (Certified Fairs Executive).

Designation & Certifying Organization	(15 points)
_____	_____

TOTAL CERTIFICATION POINTS (30 maximum, 0 minimum) _____

CONTINUING EDUCATION _____

Approved continuing education programs are listed in Professional Development and Service in the accompanying information package. To receive credit for programs not listed, you must include a program from the event for evaluation by the Certification Board. The determination as to whether you will receive credit rests solely with the Certification Board.

FACILITY MANAGEMENT SEMINARS OR CONFERENCES – includes Severe Weather Preparedness, Facility Law)

<i>Program Name</i>	<i>Sponsoring Organization</i>	<i>Dates</i>	<i>Points (5 per program)</i>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MANAGEMENT SEMINARS (NON-FACILITY RELATED) OR CONFERENCES

<i>Program Name</i>	<i>Sponsoring Organization</i>	<i>Dates</i>	<i>Points (5 per program)</i>
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_____	_____	_____	_____
_____	_____	_____	_____

FACILITY MANAGEMENT WEBINARS (AUDIOCONFERENCE)

<i>Program Name</i>	<i>Sponsoring Organization</i>	<i>Dates</i>	<i>Points (2 per program)</i>
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_____	_____	_____	_____
_____	_____	_____	_____

MANAGEMENT (NON-FACILITY RELATED) WEBINARS

<i>Program Name</i>	<i>Sponsoring Organization</i>	<i>Dates</i>	<i>Points (2 per program)</i>
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_____	_____	_____	_____
_____	_____	_____	_____

IAVM CORE TRACKS

<i>Program Name</i>	<i>Sponsoring Organization</i>	<i>Dates</i>	<i>Points (4 per completed track)</i>
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_____	_____	_____	_____
_____	_____	_____	_____

IAVM Online Digital Content

<i>Program Name</i>	<i>Sponsoring Organization</i>	<i>Dates</i>	<i>Points (3 per program)</i>
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_____	_____	_____	_____
_____	_____	_____	_____

TOTAL CONTINUING EDUCATION POINTS (70 maximum, 20 minimum)

FACILITY INTENSIVE EDUCATION PROGRAMS

Approved facility intensive education programs are listed in Professional Development and Service in the accompanying information package. To receive credit for programs not listed, you must include a program from the event for evaluation by the Certification Board. The determination as to whether you will receive credit rests solely with the Certification Board.

<i>Program Name</i>	<i>Sponsoring Organization</i>	<i>Dates</i>	<i>Points</i>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL FACILITY INTENSIVE EDUCATION POINTS (100 maximum, 20 minimum)

* PAFMS @ Oglebay, Graduate Institute and PVMS students earn 20 points per one-week class; Leadership Institute and Senior Executive Symposium attendees earn 20 points per program. Academy for Venue Safety & Security attendees earn 20 points per program .

TEACHING/PROGRAM PARTICIPATION (in addition to points above)

Participation as a teacher, speaker, or presenter of a continuing education program or professional program. To receive credit for programs not listed, you must include a printed program from the event for evaluation by the Certification Board. The determination as to whether you will receive credit rests solely with the Certification Board.

FACILITY MANAGEMENT SEMINARS OR CONFERENCES

<i>Program Name</i>	<i>Sponsoring Organization</i>	<i>Dates</i>	<i>Points (5 per program)</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MANAGEMENT SEMINARS/CONFERENCES (NON-FACILITY RELATED)

<i>Program Name</i>	<i>Sponsoring Organization</i>	<i>Dates</i>	<i>Points (2 per program)</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

FACILITY-INTENSIVE EDUCATION PROGRAMS

<i>Program Name</i>	<i>Sponsoring Organization</i>	<i>Dates</i>	<i>Points (15 per program)</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

INDUSTRY RELATED COLLEGE COURSES

<i>Course Name</i>	<i>University or College</i>	<i>Dates</i>	<i>Points (15 per semester)</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MENTOR CONNECTOR PROGRAM

	<i>Dates</i>	<i>Points</i>
Coach (2 points per relationship with a limit of 3 relationships per year; Maximum 6 points per year.)	_____	_____
Mentor (5 points per relationship; Maximum 1 relationship per year.)	_____	_____
Protégé (2 points per relationship; Maximum 1 relationship per year.)	_____	_____

TOTAL TEACHING/PROGRAM PARTICIPATION POINTS (50 maximum, 0 minimum) _____

PUBLICATION OF WRITTEN WORKS

FACILITY MANAGEMENT BOOKS

<i>Title</i>	<i>Publisher</i>	<i>Date</i>	<i>Points</i> <i>(50 per publication)</i>
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FACILITY MANAGEMENT PUBLISHED ARTICLES

<i>Title</i>	<i>Published in</i>	<i>Date</i>	<i>Points</i> <i>(3 per article)</i>
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TOTAL PUBLICATIONS POINTS *(50 maximum, 0 minimum)*

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PROFESSIONAL AND COMMUNITY ACTIVITIES

PROFESSIONAL ORGANIZATIONS

SERVICE ON BOARD

<i>Organization</i>	<i>Position</i>	<i>Dates</i>	<i>Points</i> <i>(4 per year)</i>
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SERVICE ON COMMITTEE

<i>Organization</i>	<i>Committee</i>	<i>Dates</i>	<i>Points</i> <i>(3 per year)</i>
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OFFICER OF BOARD (in addition to Service on Board points)

<i>Organization</i>	<i>Position</i>	<i>Dates</i>	<i>Points</i> <i>(2 per year)</i>
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<i>CHAIR OF COMMITTEE (in addition to Service on Committee points)</i>			
<i>Organization</i>	<i>Position</i>	<i>Dates</i>	<i>Points (1 per year)</i>

LOCAL/COMMUNITY ORGANIZATIONS			
<i>SERVICE ON BOARD</i>			
<i>Organization</i>	<i>Position</i>	<i>Dates</i>	<i>Points (2 per year)</i>

<i>SERVICE ON COMMITTEE</i>			
<i>Organization</i>	<i>Position</i>	<i>Dates</i>	<i>Points (2 per year)</i>

<i>OFFICER OF BOARD (in addition to Service on Board points)</i>			
<i>Organization</i>	<i>Position</i>	<i>Dates</i>	<i>Points (1 per year)</i>

<i>Chair of Committee (in addition to Service on Committee points)</i>			
<i>Organization</i>	<i>Position</i>	<i>Dates</i>	<i>Points (1/2 per year)</i>

TOTAL PROFESSIONAL/COMMUNITY POINTS *(50 maximum, 20 minimum)* _____

GRAND TOTAL POINTS *(300 minimum)* _____

PROFESSIONAL REFERENCES

Candidates for certification are required to provide letters of reference along with the application from three references working in the field of public assembly facility management who would attest to the candidate's professional experience and qualifications. It is requested that the candidate include their current employer as the first reference if applicable and appropriate. Please list your references below and attach the letters of reference to the application.

1. Name: _____ Position: _____
Organization: _____
Address: _____

Telephone: _____
Email: _____

2. Name: _____ Position: _____
Organization: _____
Address: _____

Telephone: _____
Email: _____

3. Name: _____ Position: _____
Organization: _____
Address: _____

Telephone: _____
Email: _____

IAVM CODE OF ETHICS

The International Association of Venue Managers is, as the name implies, an association of managers—the people who administer the affairs of public assembly facilities.

IAVM's objectives are to promote and develop the use of public assembly facilities along definite lines of entertainment and public advancement; to use every effort to acquaint and circulate information of interest and value to the public and managers pertaining to the successful use of such buildings; to cultivate acquaintances among the managers of public assembly facilities; to increase their ability in promoting more frequent use of such buildings by the public and to standardize practices and ethics of management and relationship to the public. To further the objectives of the International Association of Venue Managers, the Association believes that certain ethical principles should govern the conduct of every professional manager in the Association.

The manager should:

- o Strive for continued improvement in the proficiency and usefulness of service.
- o Maintain the highest ideals of honor and integrity in all public and personal relationships.
- o Emphasize friendly and courteous service to the public and recognize that the function of the building is at all times to serve the best interest of the public.
- o Exercise fair and impartial judgment in all Association and professional business dealings.
- o Maintain the principle of fairness to all.
- o Have a firm belief in the dignity and worth of service rendered by the building and have a constructive, creative, and practical attitude.
- o Refrain from any activity that may be in conflict with the interest of the employer.

OTHER INFORMATION

If additional space is required, attach extra 8 ½ x 11 sheets to the application. Make certain your name appears at the top of all supplemental sheets. Number all pages, which should be stapled together with the application form on top. Additional pages as well as supporting materials should be sent directly to the Certification Program Administrator at the address below.

Before submitting your application, double check that all requirements have been fulfilled. **Deadline for receiving applications is November 1.** Payment in the amount of **US\$150 / \$200** for non-members payable to the International Association of Venue Managers must accompany the application. This fee is non-refundable. If the application is approved, an exam fee of **US\$450 / \$600** for non-members will be required.

APPLICANT'S STATEMENT

By checking this box, I am documenting the need for accommodations in testing in accordance with the Americans with Disabilities Act of 1990 and will contact the Certification Administrator with specifications.

I would like the Board to conduct my oral interview at: (choose one)

VenueConnect - Annual Conference and Trade Show

Senior Executive Symposium ***Subject to Board availability and meeting schedule.**

October Certification Board meeting (date tbd) ***Subject to Board availability and meeting schedule.**

VMA Annual Congress (date tbd)

I hereby apply for certification offered by the International Association of Venue Managers and understand that the information accrued in the certification process may be used for statistical purposes and for evaluation of the certification program. I further understand that the information for my certification records will be treated confidentially. To the best of my knowledge, the information contained in this application is true, complete, correct, and is made in good faith. I understand that IAVM reserves the right to verify any or all information on this application and that any incorrect or misleading information may constitute grounds for revocation of my certification or other disciplinary action. I have read and understand all of the aforementioned information and agree to abide by terms and conditions contained herein.

If awarded the designation of CERTIFIED FACILITES EXECUTIVE, I agree to uphold the Code of Ethics adopted by IAVM.

Signed by: _____
Applicant *Date*

**Please Return To:
IAVM, CFE Program
635 Fritz Dr., Suite 100
Coppell, TX 75019**

**Phone: 972-906-7441/ Fax: 972/906-7418
Email: certification@iavm.org**