




Certified Public Fleet Professional Eligibility Application

Important Instructions — Please Read Before Completing This Application

Carefully review the following instructions **before** filling out your application.

Incomplete or improperly completed applications **may result in processing delays** or **ineligibility**. The application **must be completed in full**.

 An **invoice** will be generated and sent to the email address you provide **within one to two weeks** after your completed application is received.

Submission Guidelines

1. **Meet all eligibility requirements** before submitting your application.
2. An application is considered **complete** only if:
 - All requested information is **provided**
 - All responses are **legible**
 - All details are **accurate**Incomplete applications will be returned with a request for missing information, which may cause **processing delays**.
3. **Retain a copy** of your completed application and these instructions for your records.

Application Fee

Instructions: Please indicate your APWA member status and select your payment method below.

Member: \$195 USD

Nonmember: \$245 USD


Accepted Payment Methods

- Credit Card (Visa / MasterCard / American Express)
- Check or Money Order (payable to **APWA** in **US funds**)

Note: Purchase orders are **not accepted**.

Submit Completed Applications To:

 **Email:** certification@apwa.org

 **Mail:** **APWA – Attn: Certification**
1200 Main Street, Suite 1400
Kansas City, MO 64105-2100

Payment Method (Select One)

Credit Card (Visa / MasterCard / American Express)

An **invoice** will be generated and sent to the email address you provide **within one to two weeks** after your completed application is received. To provide payment, please **call 1-800-848-2792** and have your **invoice number** ready.

Check / Money Order (Payable to **APWA** in US funds)

Mail your **payment** along with the **completed application** to the address above.



Eligibility Application Process

Participation in the public fleet professional certification program is open to individuals who meet the specified eligibility requirements. **Membership in APWA is not required** to apply.

The **APWA Certification Council** reserves the right to request additional documentation or conduct inquiries as necessary to evaluate the applicant's **education, experience, professional competency, and/or moral character**.

All communication regarding the certification process will be sent to the **contact information** provided in the application. It is the responsibility of the applicant to inform APWA **in writing** of any changes to their contact details.

Eligibility Requirements

The certification program consists of the following three components:

1. **Eligibility application process**
2. **Multiple-choice examination**
3. **Recertification process**

To qualify for the program, candidates must submit an application documenting compliance with **all of the following requirements**:

Education and Work Experience

Completion of **one** of the following pathways:

- **High school diploma or equivalent**
→ Seven (7) years of relevant work experience, **including at least four (4) years in public fleet management**
- **Trade school certificate or associate degree**
→ Five (5) years of relevant work experience, **including at least three (3) years in public fleet**
- **Bachelor's degree or higher**
→ Three (3) years of relevant work experience, **including at least two (2) years in public fleet**

Relevant Work Experience Definition:

Experience must be in the role of a **fleet professional**, defined as someone who **supervises, manages, oversees, or administers fleet services** within a **public or private fleet entity**.

Additional Requirements

- A signed **statement of agreement** to adhere to the **APWA Standards of Professional Conduct**
 - **Affirmation** that the applicant has **no felony convictions** related to infrastructure inspection
 - **Payment** of the **current, non-refundable application fee**
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Applicant Ineligibility

An applicant may be deemed **ineligible** to take the examination for any of the following reasons:

- **Insufficient documentation** to assess eligibility
- Submitted documentation **does not meet eligibility requirements**
- **Non-payment** of required fees

If an application is incomplete or lacks adequate documentation, the applicant will be **notified** and given a **deadline** to submit the missing materials.

Failure to provide the necessary documentation by the specified deadline will result in **denial of the application**.

Fees and Payment Methods

The following fees apply to the **Certified Public Works Professional – Management** certification process:

Eligibility Application Fee (non-refundable)

- **APWA Member:** \$195 USD
- **Nonmember:** \$245 USD

Examination Fee

- **Employer Proctored:** \$500 USD
- **Testing Center:** \$500 USD + applicable testing center fees

Recertification Application Fee (non-refundable)

- **APWA Member:** \$195 USD
- **Nonmember:** \$245 USD

Accepted Payment Methods

Fees may be paid using one of the following methods:

- **Credit card** (Visa, MasterCard, American Express)
- **Check** or **money order** made payable to **APWA** in **US funds**

Note: Purchase orders will **not** be accepted.

Processing Time

If the application is **complete** and all requirements are met, the standard review time is **10 business days** from the date of receipt. Incomplete applications will result in **delays** in processing.

Once approved, the applicant will receive an **email with instructions** on how to apply for the examination.

Important: Examination applications submitted at the same time as eligibility applications will **not be processed**. Please wait until your eligibility has been confirmed before applying for the exam.



Part A: Candidate Information

Note: All fields are required unless otherwise indicated. Incomplete applications may delay processing.

First Name: _____ Middle Initial: _____ Last Name: _____

Organization (Agency/Firm): _____ Job Title: _____

Office Address: _____ City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Office Email: _____ Office Phone Number: _____

Home Address: _____ City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Home Email: _____ Home Phone Number: _____

Preferred Mailing Address: ☐ Office ☐ Home

Part B: Documentation of Education

To establish eligibility, you must document completion of **one** of the following education and work experience pathways:

- **High school diploma or equivalent**, and **seven (7) years** of relevant work experience, including **at least four (4) years** in public fleet management.
- **Trade school certificate or associate degree**, and **five (5) years** of relevant work experience, including **at least three (3) years** in public fleet management.
- **Bachelor's degree or higher**, and **three (3) years** of relevant work experience, including **at least two (2) years** in public fleet management.

Please indicate your highest level of education completed or degree conferred (check one):

☐ High School Diploma or Equivalent

☐ Trade School Certificate or Associate Degree

☐ Bachelor's Degree or Higher

Institution Name	Dates Attended	Highest Level of Education Achieved
_____	_____	_____



Part C: Documentation of Work Experience

Based on your selected education level, determine the number of years of **relevant work experience** you must document. Then, complete the form below for **each position** that contributes to your required experience.

Note: Complete a **new page for each position** or attach a Word document with all required information.

Position Information (complete one form per position)

Name of Applicant: _____ **Job Title:** _____

Name of Organization: _____ **Position Held:** _____

Organization Address: _____

Dates of Employment (Month/Year): From: _____ **To:** _____ **Length of Employment:** _____

Summary of Job Responsibilities:

Attach your **current resume** or provide a detailed summary below of your work experience relevant to **public or private fleet**. (Provide a detailed description of duties and responsibilities, focusing on those related to **public or private fleet management**.)

Important: Incomplete applications or vague descriptions of job responsibilities may result in a finding of **ineligibility**.



Part D: Verification of Work Experience

Instructions: This section must be completed by **two authorized individuals** who can verify the applicant's work experience as described in Part C:

The applicant's **current supervisor** and a representative from **Human Resources** of the organization.

Current Supervisor Verification:

Full Name of Current Supervisor

Current Title

Daytime Phone Number

I verify that the applicant named in this application is or was employed by the organization I represent. I have reviewed the job responsibilities listed in Part C and confirm that the applicant's experience meets the definition of relevant work experience.*

Signature: _____

Date: _____

Human Resources Verification:

Full Name of Human Resources Personnel

Current Title

Daytime Phone Number

I verify that the applicant named in this application is or was employed by the organization I represent. I have reviewed the job responsibilities listed in Part C and confirm that the applicant's experience meets the definition of relevant work experience.*

Signature: _____

Date: _____

**Relevant work experience is performed in the role of a fleet professional, defined as one who actively supervises, manages, oversees, or administers fleet services within a public or private fleet entity.*

Part E: Agreement and Affirmation

Review the following **Standards of Professional Conduct** carefully, then sign and date the section below.

As a candidate for certification, I affirm the following:

- I will keep the public trust and will not take personal advantage of privileged information or relationships.
- I will put public interest above individual, group, or societal interest and consider my chosen occupation as an opportunity to serve society.
- I will encourage sustainability through the wise use of resources, whether they are natural resources, financial resources, or human resources.
- I will consider public health and safety in every aspect of my work.
- I will conduct myself with personal integrity in a manner that enhances and honors the reputation of the profession, my employer, my community, and the association.
- I will ensure that the work for which I am responsible complies with all legal requirements of the local, state, province, or federal governments.
- I will strive to plan, design, build, maintain, and operate public infrastructure in a manner that respects the environment and the ability of government to adequately preserve these assets for succeeding generations.

I agree to adhere to the **APWA Standards of Professional Conduct**, and I affirm that I have no felony convictions related to the practice of fleet management.

Signature: _____

Date: _____

Part F: Candidate Acknowledgement

I certify that all information and documentation provided in this application is true and complete to the best of my knowledge. I understand that APWA reserves the right to verify any information submitted and that submitting this application does not guarantee certification or any associated privileges.

Signature: _____

Date: _____



Part G: Final Checklist

Please review the checklist below to ensure that your application is complete. Incomplete applications may result in delays or denial of eligibility.

Part A: Candidate Information

I have completed all required fields in Part A.

Part B: Documentation of Education

I have indicated my highest level of education completed and/or enclosed a copy of my certificate, diploma, or transcript.

Part C: Documentation of Work Experience

I have documented the required number of years of fleet experience, based on my education level.

Part D: Verification of Work Experience – Authorized Signatures

I have obtained original signatures from **two authorized individuals** (a current supervisor and a human resources representative) verifying my work experience.

Part E: Agreement and Affirmation

I have read and signed the APWA Standards of Professional Conduct statement.

Part F: Candidate Acknowledgement


I have signed the statement affirming the accuracy and completeness of this application.

Application Submission

I have compiled all required materials into a single application packet and submitted it to APWA.

Submit your completed application to:

 **Email:** certification@apwa.org

 **Mail: APWA – Attn: Certification**
1200 Main Street, Suite 1400
Kansas City, MO 64105