



# The Professional Conference Organisers Association Inc.

## Certified Event Manager (CEM) Application Form

MR/Mrs/Ms: \_\_\_\_\_ Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Organisation: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Tel No: \_\_\_\_\_ Mobile: \_\_\_\_\_

Fax No: \_\_\_\_\_ Email: \_\_\_\_\_

Business URL: \_\_\_\_\_

Copies of tertiary qualifications and/or copies of certificates of attainment for tertiary course modules and the appropriate application fee must be forwarded with this application. Referees have the option of forwarding written testimonials directly to the Association.

Applicants must be current members of The PCO Association Inc. New Zealand applicants must also be members of CINZ.

Application Fee: Certified Event Manager - Standard Entry AU\$220.00 (inc GST).

### **SECTION 1: INTELLIGENCE/ACADEMIC ABILITY**

Please attach evidence of Tertiary qualifications outside of the Event Management area of specialisation.

Certificate	8 points
Diploma	10 points
Degree	12 points

Total points claimed: \_\_\_\_\_

### **SECTION 2: INDUSTRY QUALIFICATIONS**

2.1 Please attach evidence of Industry qualifications completed:

Certificate III in Events	15 points
Diploma of Events	24 points
Advanced Diploma of Events	28 points
Undergraduate degree in Event Management	30 points
Masters in Event Management	30 points

Total points claimed: \_\_\_\_\_

2.2 The applicant is in the process of completing a formal industry qualification, and is claiming 1 point per module completed. Please attach evidence of any completed modules.

Total points claimed: \_\_\_\_\_



**SECTION 3: EVENT EXPERIENCE - COMPULSORY**

The applicant must have held a position as an Event Manager or Conference Manager for a minimum period of 3 years immediately prior to this application. Please attach evidence (e.g. letter from employer; company profile; position description)

Total points applicable to this section: **24**

**SECTION 4: QUALITY OF DELIVERY - COMPULSORY**

- 4.1 Written testimonials are required from 3 clients, providing evidence of the successful completion of events covering the 3 years immediately prior to this application.
- 4.2 Written testimonials are required from 3 venues/suppliers covering the 3 years immediately prior to this application.

Testimonials for In-house PCOs may be provided by either their Director or Department Head and one testimonial may cover multiple years.

Testimonials for PCO Educators may be provided by their Department Head and may be by way of a declaration of 3 years experience as a Tertiary Lecturer or similar position

A Guideline for referees is available on the PCO website. Please ensure referees include contact details.

Total points applicable to this section: **24**

**TOTAL POINTS CLAIMED FOR THIS APPLICATION:** \_\_\_\_\_  
**(Minimum points required = 72)**

I hereby declare that the information provided in this application is a true and correct representation of my past 3 years work history and that the referees have been informed that they will be contacted by an Assessor from the PCO Association to confirm the testimonial they have provided to accompany this application.

Signed by the Applicant..... Date .....



**PAYMENT DETAILS:**

**CEM Application Fee: AU\$220.00 (inc GST)**

**Option 1:** Make cheque payable to the PCO Association Inc

**Option 2:** EFT to the account of:  
PCO Association Inc  
Westpac Banking Corporation  
The Pines Qld  
BSB 034 604  
Account Number 21 2480

An email to [council@pco.asn.au](mailto:council@pco.asn.au) containing details of the transaction must accompany any EFT payment

**Option 3:** Credit Card Authority for Payment

Please indicate your credit card type below:

Master Card     Visa

Cardholder Name \_\_\_\_\_

Card Number \_\_\_\_\_

Expiry Date \_\_\_\_\_

Verification number is \_\_\_\_\_

Signature \_\_\_\_\_

Application fee authorised \$ \_\_\_\_\_

**Please send completed application with payment to:-**

**PCO Association Inc**  
**PO Box 413**  
**Tweed Heads NSW 2485**  
**AUSTRALIA**  
**Email: [council@pco.asn.au](mailto:council@pco.asn.au)**  
**Fax: 07 3461 0156**