

23461 South Pointe Dr., Ste. 200  
 Laguna Hills, CA 92653  
 (949) 916-2226  
 (949) 916-5557-Fax  
 Page 1 of 5

**California Association of Community Managers<sup>SM</sup>**  
**CERTIFIED COMMUNITY ASSOCIATION MANAGER**  
**(CCAM<sup>®</sup>)**

**RECERTIFICATION APPLICATION**

<b>FOR CACM USE ONLY</b>
Member ID #
Applicant Name (Last, First)
Application Approved By
Date Approved

1a. Applicant Last Name	1b. Applicant First Name	Middle Initial
2a. Have you ever held membership in CACM under another name? <input type="checkbox"/> Yes <input type="checkbox"/> No	2b. If yes, under what name?	
3a. Firm or Association Name	3b. Email Address	
3c. Business Address	3d. City/State/Zip Code	
3e. Business Telephone	3f. Business Fax Number	
4a. Residence Address	4b. City/State/Zip Code	
4c. Residence Telephone	5. Date of Birth	

6. Which above address do you wish CACM to use for mailing?  Residence  Business

7. Do you possess other Professional Designations/Licenses (e.g., CPM, PCAM, CPA, Broker)?

Designation/License	Issuing Agency	Number and Expiration Date (If Applicable)
_____	_____	_____
_____	_____	_____

8. Please identify experience, as it relates to community associations, since your last date of certification. (Attach additional sheet if necessary.)

From	To	Employer	Phone
Summary of Experience			
From	To	Employer	Phone
Summary of Experience			

**If you answer "yes" to any of the following questions, please attach a detailed, written explanation.**

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	9. Have you ever been involved in a re-organization for the benefit of creditors or in bankruptcy proceedings as a debtor?
<input type="checkbox"/>	<input type="checkbox"/>	10. Have you ever been involved in either civil or criminal legal proceedings as a defendant in which there were allegation of fraud, misrepresentation, or misappropriation of funds or property, etc?
<input type="checkbox"/>	<input type="checkbox"/>	11. Have you ever been refused bonding, fidelity or crime insurance, or had any such coverage canceled?
<input type="checkbox"/>	<input type="checkbox"/>	12. Have you ever been subject to disciplinary action by CACM or any other professional association?
<input type="checkbox"/>	<input type="checkbox"/>	13. Have you ever had any professional license suspended or revoked or otherwise been subject to disciplinary action by any licensing agency?
<input type="checkbox"/>	<input type="checkbox"/>	14. Have you ever been convicted of or pled no contest to a felony?

**RECERTIFICATION APPLICATION  
 CERTIFIED COMMUNITY ASSOCIATION MANAGER  
 (CCAM<sup>®</sup>)**

**Full Service Management Only - Experience Report**

*If you complete this page you do not need to complete pages 3 or 4 (Financial Management or Consulting).*

15. Applicant's Name _____		15a. Firm or Association Name _____																									
15b. Title _____	Is this a paid position? _____	15c. Period from _____ to _____																									
15d. Name/Title of Immediate Supervisor _____		15e. Supervisor Email Address _____																									
15f. Number of Employees Reporting to You _____		15g. Title of Each Position Reporting Directly to You _____																									
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15k. Certification requires you perform a minimum of 7 of the following functions. Please check the boxes below for every function you perform and indicate % of time spent performing this function: <table style="width:100%; border: none;"> <thead> <tr> <th style="width:85%;"></th> <th style="width:15%; text-align: right;">Percentage</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/> 1. Budget preparation and management/administration of association financial affairs</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 2. Contract negotiation and administration</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 3. Provide advice and counsel Board of Directors regarding the interpretation of governing documents, codes and perimeters related to the activities and affairs of community associations</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 4. Supervision of association employees and staff members</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 5. Management of association maintenance programs</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 6. Management/administration of association rules, regulations and architectural standards</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 7. Management/supervision of association recreational programs</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 8. Primary responsibility for homeowners/resident/tenant communications and liaison</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 9. Risk management of association properties, activities and business affairs</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 10. Primary responsibility for implementation of association policies</td><td style="text-align: right;">_____</td></tr> <tr> <td style="text-align: right;"><b>Total</b></td> <td style="text-align: right;"><b>100%</b></td> </tr> </tbody> </table>					Percentage	<input type="checkbox"/> 1. Budget preparation and management/administration of association financial affairs	_____	<input type="checkbox"/> 2. Contract negotiation and administration	_____	<input type="checkbox"/> 3. Provide advice and counsel Board of Directors regarding the interpretation of governing documents, codes and perimeters related to the activities and affairs of community associations	_____	<input type="checkbox"/> 4. Supervision of association employees and staff members	_____	<input type="checkbox"/> 5. Management of association maintenance programs	_____	<input type="checkbox"/> 6. Management/administration of association rules, regulations and architectural standards	_____	<input type="checkbox"/> 7. Management/supervision of association recreational programs	_____	<input type="checkbox"/> 8. Primary responsibility for homeowners/resident/tenant communications and liaison	_____	<input type="checkbox"/> 9. Risk management of association properties, activities and business affairs	_____	<input type="checkbox"/> 10. Primary responsibility for implementation of association policies	_____	<b>Total</b>	<b>100%</b>
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16. On a separate sheet of paper describe in narrative form (250 words or more) your duties and responsibilities elaborating the functions you have checked above, and the level of your authority with association(s) managed.																											
Signature of <b>EMPLOYER</b> verifying accuracy of information above is <b>REQUIRED</b> . (If unattainable, attach separate sheet with specific explanation)																											
Signature _____ Date _____ Print Name/Title _____																											

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**Financial Management Only - Experience Report**

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**RECERTIFICATION APPLICATION  
CERTIFIED COMMUNITY ASSOCIATION MANAGER  
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**Consulting - Experience Report**

*If you complete this page you do not need to complete pages 2 or 3 (Full Service or Financial Management).*

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19k. Recertification requires you perform a minimum of 8 of the following functions. Please check the boxes below for every function you perform and indicate % of time spent performing this function, noting that a minimum of 40% of your overall work time must be spent on these functions. <table style="width:100%; margin-top: 10px;"> <thead> <tr> <th style="width:85%;"></th> <th style="width:15%; text-align: right;">Percentage</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/> 1. Assist in the development and negotiation of contracts</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 2. Advise and counsel Boards of Directors regarding the interpretation of governing documents, codes and parameters related to the financial activities and affairs of the community association</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 3. Communicate with board/owner/resident/tenant communications regarding the financial activities of the association</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 4. Guide the budget preparation and management of association financial affairs</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 5. Provide services for the billing and collection of assessments and the application of delinquency control policy of the Association</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 6. Respond to escrow demand statements, request for disclosures, and 3<sup>rd</sup> party requests for access to association documents</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 7. Consult with board/financial institutions regarding association funds, updating bank signature cards, investment of reserve funds and related activities</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 8. Prepare interim financial statements and accompanying documents that comply with Civil Code Section 1365.5</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 9. Prepare annual financial statements in compliance with Civil Code Section 1365</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 10. Development or provide guidance in development of association rules, regulations and architectural standards</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 11. Develop or provide guidance in development of association maintenance programs</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 12. Develop or provide guidance in development of association policies</td><td style="text-align: right;">_____</td></tr> <tr><td><input type="checkbox"/> 13. Risk management of association properties, activities and business affairs</td><td style="text-align: right;">_____</td></tr> <tr> <td align="right"><b>Total</b></td> <td style="text-align: right;"><b>40% (min)</b></td> </tr> </tbody> </table>					Percentage	<input type="checkbox"/> 1. Assist in the development and negotiation of contracts	_____	<input type="checkbox"/> 2. Advise and counsel Boards of Directors regarding the interpretation of governing documents, codes and parameters related to the financial activities and affairs of the community association	_____	<input type="checkbox"/> 3. Communicate with board/owner/resident/tenant communications regarding the financial activities of the association	_____	<input type="checkbox"/> 4. Guide the budget preparation and management of association financial affairs	_____	<input type="checkbox"/> 5. Provide services for the billing and collection of assessments and the application of delinquency control policy of the Association	_____	<input type="checkbox"/> 6. Respond to escrow demand statements, request for disclosures, and 3 <sup>rd</sup> party requests for access to association documents	_____	<input type="checkbox"/> 7. Consult with board/financial institutions regarding association funds, updating bank signature cards, investment of reserve funds and related activities	_____	<input type="checkbox"/> 8. Prepare interim financial statements and accompanying documents that comply with Civil Code Section 1365.5	_____	<input type="checkbox"/> 9. Prepare annual financial statements in compliance with Civil Code Section 1365	_____	<input type="checkbox"/> 10. Development or provide guidance in development of association rules, regulations and architectural standards	_____	<input type="checkbox"/> 11. Develop or provide guidance in development of association maintenance programs	_____	<input type="checkbox"/> 12. Develop or provide guidance in development of association policies	_____	<input type="checkbox"/> 13. Risk management of association properties, activities and business affairs	_____	<b>Total</b>	<b>40% (min)</b>
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**RECERTIFICATION APPLICATION  
CERTIFIED COMMUNITY ASSOCIATION MANAGER  
(CCAM<sup>®</sup>)**

**PLEASE READ AND ACKNOWLEDGE BY SIGNING BELOW**

This application is submitted to CACM with the understanding that:

1. The information provided will be used to assist CACM in judging the applicant's eligibility for CCAM status.
2. Additional information that may be required by CACM shall be supplied promptly upon request.
3. The applicant is at least 18 years of age.
4. The information provided is complete and correct to the best of the applicant's knowledge.
5. The information will be considered confidential, except as may be required to process and approve the application.
6. There are no actions charged against the applicant or challenges to the applicant's responsibility, character or integrity.
7. Any information or comment furnished to CACM by any person or response to an invitation to provide information shall be conclusive, deemed to be privileged, and not form the basis of any action by the applicant for slander, libel or defamation of character. CACM reserves the right to document all information contained herein.
8. The applicant agrees to waive any and all claims against CACM, its officers, directors, employees, agents, attorneys, and members arising out of any act or omission in connection with the consideration, rejection or acceptance of this application, or any act or omission by CACM in disappointing the applicant if the application is not approved, including any suspension or expulsion of the applicant as a CCAM program applicant.
9. The applicant wholeheartedly subscribes to the official CACM Code of Professional Ethics and Standards of Practice.
10. The applicant understands his/her responsibility to provide CACM with current place of business and any change thereto.
11. The applicant understands and agrees to permit the Professional Standards Committee to review this application and any attachments thereto or subsequent information submitted or obtained related thereto, and investigate any portions thereof as it may deem necessary.
12. The applicant understands that if their membership or certification is terminated as a result of a disciplinary action by the Professional Standards Committee, they will not be eligible to reinstate or reapply for either.

In addition to the foregoing, each Member shall have the duty and the responsibility to arbitrate controversies arising out of management contracts and the community association management business with any and all forms of Associations as specified in the Code of Professional Ethics and Standards of Practice.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Signature of applicant verifies the accuracy of this application and acknowledges the applicant has read the rules and regulations stated above and authorizes CACM and/or its agents to verify all items listed above.*