CIPM Recertification Application form International **Project Management Institute of Projects** Certification **Release Date** & Program 23.08.2019 Form No. **Procedures Handbook-Forms** Management F6-1 Version No. ISO / IEC 17024 : 2012 Page Revision Index Rev 3 Rev 2 Rev 1 Approved by: Remarks: Chairman, i2P2M

Form - F6-1 **CIPM Recertification Application form** Form F6-1 1/2 12P2M International Institute of Projects & Program Management Certificate In Project Management (CIPM) **Application Form for Recertification** Section 1 1.0 CIPM Certificate Number CIPM Name Prefix: (Mr. / Mrs. / Ms. Dr.) First Name Initial Middle Name Last Name Name for printing in certificate if different to above: 1.2 Home Address City_ Pin / Zip code 1.3 Email Personal: Email Work: 1.4 Phone Work Landline: Extension 1.5 Continuous Professional Development Points Earned **Enclose CPD Log Sheet** Highest Qualification: Experience in Yrs: 1.6 Designation: Your main industry: Company Name & address State Pin / Zip code

International

Drainet Management

CIPM Recertification Application form

Institute of Drainete	Project Management	Application	
Institute of Projects & Program Management	Certification	Form No.	Release Date
	Procedures Handbook-Forms		23.08.2019
Management	Procedures Handbook-Forms	F6-1	Version No.
	ISO / IEC 17024 : 2012		1
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Approved by:	Remarks:		
Chairman, i2P2M			

Form F6-1 Contd.



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Certificate In Project Management (CIPM) **Application Form for Recertification**

Section 2	DECLARATION	
1		
S/o, D/o/ W/O _		hereby declare that

- « The details given in attached CPD Log Sheet are correct and for the purpose of recertification. If i2P2m will require any additional information from me, I will furnish it immediately.
- « Incase any information given in CPD log sheet is found to be incorrect, I understand that my certification will be withdrawn and I will be barred for period of 2 years to reapply for the certification.
- « I hereby confirm that during the period of my certification, I complied with i2p2M's Code of Ethics and Professional Conduct, fully and there have been no complaints of any kind against my professional conduct.
- « I will be fair in all my dealings and work without any prejudice or bias with all stakeholders, customers and partners irrespective of their status, gender, age, caste, religion.
- « I will discharge my duties ethically with utmost integrity and keep stakeholders informed as required in performing any duties.

Place:		
Date:	Signature	