



Outside Continuing Education Application (OCEA)

CDMM®/Applicant Name: _____

Email: _____ Course Location: _____

Provider Name: _____

Course Name: _____

Course Date: _____ Course Times: _____ - _____

- Incomplete applications will be returned until all information is provided.
- Courses must be submitted prior to or no more than 60 days following the event.
- Personal business experience courses do not qualify; education must directly benefit the client.

The following information must be provided along with this application:

Select the applicable content category, indicating the alpha/numeric sub-category based on the Detailed Recertification Content Outline: (found at www.aadmm.com click the dropdown menu, go to "Certification" "Recertification" "Recertification Content", the detailed content outline is a clickable item below the description)

Include Alpha / Numeric sub-category assignment:

- | | |
|--------------------------------------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Bill Paying - _____ / _____ | <input type="checkbox"/> Types of Expenses - _____ / _____ |
| <input type="checkbox"/> Basic Finance/Bookkeeping - _____ / _____ | <input type="checkbox"/> Ethics - _____ / _____ |
| <input type="checkbox"/> Payroll and Tax Basics - _____ / _____ | <input type="checkbox"/> Standards of Practice - _____ / _____ |

I have included a course brochure/documentation which must include the following:

- Course date, Location, City and State or Provider for online events
- Breakdown of classroom time (Start and Stop time) (also: education, meals, breaks, etc.)
- Course objectives/content description (session titles alone are not adequate to determine eligibility)
- Presenter information (Name/Bio)

I have attended this event in person, phone, webinar or recorded event (self-study is not acceptable) *Recorded events must provide the method of attendance verification:

- Code verification
- Sign In/Sign Out/Role Call
- Time tracking software
- Exam with passing grade of no less than _____ %
- Other (Please explain: _____)

I have or will obtain verified proof of attendance signed by the course sponsor.

I understand, if this course is deemed acceptable for CDMM recertification hours, the approval certificate will be added to the AADMM Certification Tracking Software. Denied courses will be notified via email. I am responsible for obtaining proof of attendance, if proof of attendance is not submitted at time of request the course hours will be applied with the course listed as "Pending" until proof of attendance is provided.

Signature

Date

The Certification Board meets monthly, application deadline is the 1st Wednesday of each month.

For questions, please contact Kelly Dolan at certification@aadmm.com or 877-326-5991.

For Office Use: Date Submitted: _____ Date Replied: _____ Approved: _____ Denied: _____