CEM Application
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Version No: 1.1 Approved by: Helen Johnson Approved on: 12/6/2018

1) Seminar Name / Date / Location (REQUIRED): ______

Effective Date: 7/3/2019

Supersedes: 1.0

CEM®APPLICATION

CEM Exam with Live In-House Seminar Version

Please use this form only if you plan on taking the CEM Certification Exam held in-conjunction with one of the Live AEE Seminars

NOTE: The following information is to be fill				
Information for Applicants very carefully, and for AEE Certification Board have substantiating da				
provided to candidates with a disability (as de				
certification application, a written explanation o				
form is available on the CEM website – www.a	<u>eecenter.org/c</u>	cem.	·	
Mail or email application to:				
AEE – CEM Certification Dept. 3168 Mercer University Drive				
Atlanta, GA 30341				
Email: crystal@aeecenter.org				
D				
Personal Data (Please print or type) Full legal name as it will appear on certificate:	File Nun	mber:	(AEE Internal Use Only)	
Mr. ☐ Ms. ☐ Last Name:	Lo	gal Firet Namo:	Middle Initial	
Job Title:				
Firm Name:				
Address:				
City:	State:	ZIP code:	Country:	
Phone:Fax:		Business E-mail:		
Residence Address:				
City:	State:	ZIP code:	Country:	
Mobile Phone:	Pe	rsonal E-mail:		
Address Requested for Correspondence: Business	Residence	<u> </u>		
E-mail Address Requested for Correspondence: Busi	iness \Box	Personal		
1	_			

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IVISION I – EDUCATION I – EDUCATION I – EDUCATION I – EDUCATION IN COLOR IN	me and location of each of ege Transcripts where of son.	degree was issu	ued to be forwarde	ed to AEE, but do not c
urrently use (ie. your maiden na Name & Location Of Institution				Field In Which Degree Was Issued
IVISION II - PROFESS Im a Professional Engineer: Im a Registered Architect: you answered yes to any of the	yes yes above, complete the follo	no no	se a copy of your	registration. Registra
ust indicate that license is cu	intentry in force.			
ust indicate that license is cu State	Registration No.		Date	Now in Force
	•		Date	Now in Force
	•		Date	
	•		Date	□yes □no
State	•	-	Date	☐yes ☐no ☐yes ☐no

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DIVISION III - EXPERIENCE RECORD

Applicant should forward one copy of the Employment Verification Form to each employer for those periods which apply to Certification Eligibility. Forms may be completed by immediate superiors or personnel officers and must be returned directly to AEE. Please complete the following in chronological order and list the most recent employer first. Include a description of job functions held for those periods of employment, which qualify you for specific category of certification as applied for. This form may be copied if additional space is needed.

Date:	Employer	CONCISE STATEMENT OF ENERGY-RELATED WORK PERFORMED
From-To (mm/yy – mm/yy)	Name & Address	
TITLE OF POSITION		
Date:	Employer	CONCISE STATEMENT OF ENERGY-RELATED WORK PERFORMED
From-To (mm/yy – mm/yy)	Name & Address	
TITLE OF POSITION		
Date:	Employer	CONCISE STATEMENT OF ENERGY-RELATED WORK PERFORMED
From-To (mm/yy – mm/yy)	Name & Address	OSTIGUES THE MEETING THE END THE END OF THE
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		1
TITLE OF POSITION		
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Date:	Employer	CONCISE STATEMENT OF ENERGY-RELATED WORK PERFORMED
From-To (mm/yy – mm/yy)	Employer Name & Address	CONGISE STATEMENT OF ENERGY-RELATED WORK PERFORMED
1 10111-10 (111111/yy – 111111/yy)	Ivaille & Audie55	
TITLE OF 200771011		
TITLE OF POSITION		

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AFFIDAVIT		
I		ng completed the aforementioned to the best of my ability, do CEM Examination.
I hereby agree (a) to be bound by terms and provisions of the Cosuch other regulation as may from time to time be in force, so far members, Board of Directors, Certification Board, officers, exam omission by you or them or any of them in connection with this a granting or issuance of or failure to grant or issue a certificate to certification body into disrepute and to not make misleading or u by me is not refundable; (d) that any certificate granted or issued provisions of the certification scheme; and (f) to discontinue the Energy Engineers upon suspension or withdrawal of certification contained in this application is correct to the best of my knowled.	r as they may affectiners and agents fit application, the exame; (c) to not use nauthorized statend me shall remain to use of all claims to and to return any	et me; (b) to indemnify and hold harmless each and all of your from and against any liability whatsoever in respect to any act or mination, the grades given upon such examination, and/or the the certification or certificate in such a manner to bring the nents regarding the certification; (d) that any prescribed fee paid the property of the Association; (e) to comply with the relevant certification that contain any reference to the Association of
I further pledge myself hereby to the highest ethical standards in Code of Ethics for Certified Energy Managers (www.aeecenter.o certification and nothing outside its scope.		ergy engineering/management and hereby agree to abide by the nics). I agree to make claims only to Certified Energy Manager

1.1

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CERTIFICATION DOCUMENTS CHECKLIST

Signature in Full_____

Please read the Candidate Handbook / Information for Applicants very carefully, and follow instructions for completing and forwarding forms.

The following items need to be submitted to complete your application:

Application – pages 1-4

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Letter of Employment and Job Duties Verification - pages 5-6 (years of experience needed vary with education) Letter of Client Verification – pages 7-8 (three needed to verify self-employment) Official college transcripts Official college transcripts

Professional Registration (PE or RA registration may be submitted in lieu of transcripts) Copy of training certificate (required for On-demand attendees)

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REQUEST FOR EMPLOYMENT AND JOB DUTIES VERIFICATION

Certified Energy Manager

From:	<u> </u>
To:	Date:
	Dear:
	I am applying to the Association of Energy Engineers for Certification as an Energy Manager. In this regard, I hereby authorize your release of the requested information enclosed which verifies my employment and duties from the period
	Please furnish the requested information as completely as possible, and <i>return to AEE Certification Board</i> .
	The receipt of replies will be reported by AEE, but under no circumstances will the information be divulged to me, or used for any purpose except to validate my application for Energy Manager Certification.
	Applicant Signature

NOTE: If self-employed, complete letter of client verification.

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Name:	verification. or AEE Certification. ee: om following positions:
City:	verification. or AEE Certification. ee: om following positions:
LETTER OF EMPLOYMENT and JOB DUTIES The following information verifies the employment and duties of the above applicant for the company: City: State: ZIP code The above named applicant was (has been) employed by our company for and has held the Dates: Dates: Dates: Dates: Dates:	verification. or AEE Certification. ee: om following positions:
The following information verifies the employment and duties of the above applicant for Company:	e: om following positions:
Company:	e: om following positions:
Address: City: State: ZIP code The above named applicant was (has been) employed by our company fr and has held the Dates: Dates: Dates: Dates: Dates:	om following positions:
City:State:ZIP code The above named applicant was (has been) employed by our company from and has held the pates:	om following positions:
City:State:ZIP code The above named applicant was (has been) employed by our company from and has held the pates:	om following positions:
	following positions:
To the best of my knowledge, and our employment records, I hereby atte- true and correct.	st that the above information is
Name of person supplying information:	
(Please type or print)	
Official Title of Respondent:	
Signature:	

Return to: AEE CERTIFICATION BOARD – CEM 3168 MERCER UNIVERSITY DRIVE ATLANTA, GEORGIA 30341 **CEM** Application - Inhouse **Page 7 of 8**

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REQUEST FOR CLIENT VERIFICATION Certified Energy Manager

Date:	
<u>:</u>	
Association of Energy Engineers f this regard, I hereby authorize you which verifies my employment auto	ar release of the requested
quested information as completely n Board.	as possible, and <i>return to</i>
will be reported by AEE, but und	
1 1	Association of Energy Engineers for this regard, I hereby authorize you which verifies my employment at to uested information as completely

NOTE: Complete this form only if self-employed – furnish three (3) client verification letters.

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API	PLICANT COMPLETE	
Name:		_
Address:		_
City:	State:	ZIP code:
CLIENT C	COMPLETE / LETTER	OF CLIENT VERIFICATION
The following information ver	rifies the Contractor/Consultant and	duties of the above applicant for AEE Certification.
Company:		Telephone:
Address:		
		ZIP code:
The above contractor/cor	nsultant has provided service(s) to our company from:
	to	
		ties of the applicant (REQUIRED). At incomplete details will not be processed.**
To the best of my knowled Name of person supplying	edge, I hereby attest that the about information: (Please type or print)	ove information is true and correct.
To the best of my knowled Name of person supplying Official Title of Respond	edge, I hereby attest that the about information:	ove information is true and correct.

Return to: AEE CERTIFICATION BOARD – CEM 3168 MERCER UNIVERSITY DRIVE ATLANTA, GEORGIA 30341