



# Alberta Educational Facilities Administrators Association

## Application for Certification

### Instructions to Applicants

1. Read all the instructions carefully. Incomplete or improperly prepared applications will be returned. Applications without supporting documents will be returned.
2. Attach all photocopies of your certificate, validation card, and/or college transcripts.
3. E-mail this form and all supporting documents to [aeftaa.executive@gmail.com](mailto:aeftaa.executive@gmail.com)

### Certification Fees

- Certification Fees for all levels - \$100.00
- Fees are due after the candidate has successfully completed the certification process. All fees must be paid before the certificate is issued.

Applicant Information			
First Name:	Last Name:	Date:	
Address:		City:	Province:
Postal Code:	Email Address:		
Office Phone:		Cell Phone:	
Current Member of AEFAA? <input type="checkbox"/> Yes <input type="checkbox"/> No		Years as a Member?	
Level of Certification you are applying for?	<input type="checkbox"/> CEFA Level 1	<input type="checkbox"/> CEFA Level 2	<input type="checkbox"/> CEFM Level 3

Sponsor (Required)			
Name:	Relationship:	Years Associated:	
Employer:		Job Title:	
Certification Level Willing to Sponsor: <input type="checkbox"/> CEFA Level 1 <input type="checkbox"/> CEFA Level 2 <input type="checkbox"/> CEFM Level 3			



## Work History

Relevant to maintenance, operations and/or management – current to past. Use addition pages if necessary.

Employer:

Job Title:

Employed from

to

Supervisor:

Phone Number:

Describe Core Responsibilities:

Employer:

Job Title:

Employed from

to

Supervisor:

Phone Number:

Describe Core Responsibilities:

Employer:

Job Title:

Employed from

to

Supervisor:

Phone Number:

Describe Core Responsibilities:

Please submit along with this application:

1. Your organization chart clearly showing you position and reporting relationships.
2. Position description(s) and business card. (If you do not have a position description, attach a written description of your position.)



## Education and Training

Attach copies of transcripts or certificates of completion as proof

	Diploma	Certificate Degree	Certificate	Degree	Journeyman	Other
Secondary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post-Secondary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trade School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
College	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
University	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Experience

### Educational Facility Management Experience (Position/Years)

Position	Describe Experience	Years
Lead Hand		
Sub Foreman		
Foreman		
Supervisor		
Manager		
Total Years of Educational Facility Management Experience		

### Non-Educational Industry Experience (Position/Years)

Position	Describe Experience	Years
Lead Hand		
Sub Foreman		
Foreman		

