

NOTE: SCAN YOUR SIGNED AND COMPLETED REGISTRATION FORM AND SEND ALONG WITH YOUR MOST RECENT CV/RESUME & 2 PASSPORT SIZED PICTURES TO: certification@evmi.com

	Step 1: Student Information	Please complete all fields:		
1	Please select & mark with X. <b>SEX: Male</b> Female	Mr. Ms. Mrs. Dr. Prof.		
2	*Date of Birth: DAY/MONTH/YEAR			
3	Your name is exactly what will appear on your certification *First Name:			
4	Your name is exactly what will appear on your certification *Middle Name:			
5	Your name is exactly what will appear on your certification *Last Name:			
6	* Title/Position:			
7	*Organization:			
8	*Mailing Address:			
9	*City:			
10	*State:	*Zip Code:		
11	*Country (If Outside the USA):			
12	*Work Telephone Number (include country code if outside USA)			
13	*Permanent Telephone Number			
14	*WORK EMAIL ADDRESS			
15	*PERMANENT EMAIL ADDRESS (Needed in case you change jobs. Example: abc@gmail.com, 123@yahoo.com)			
16	*What is your highest level of education?			
17	Have You Included Your Current Resume/CV and 2 Passport sized Pictures (Front face) As Required?			
18	*Was the <u>www.evmi.com/evmd</u> website useful?			
19	*How did you hear about the EVMD™ certification program? OR Please Provide full name of who you were referred by:			
20.	Are you EVMP® or EVMPAI™ or CCAM® certified by EVMI®? Please include your Certification name, Certification number, Certification date of issue and Certification expiration date here:			

Phone: +1. 469.920.4066 (USA) <u>www.evmi.com/evmd</u> Email: <u>certification@evmi.com</u>

MAILING: EVMi, 8700 Stonebrook Pkwy, Number 1624, Frisco, Texas 75034 USA



NOTE: SCAN YOUR SIGNED AND COMPLETED REGISTRATION FORM AND SEND ALONG WITH YOUR MOST RECENT CV/RESUME & 2 PASSPORT SIZED PICTURES TO: certification@evmi.com

For course locations, visit: www	v.evmi.com/evmd and view under the Registration,
•	es section. If onsite, please include your location and full address
Course name:	EVMD™ Earned Value Management Director™
Date:	Credential Certification Program (3 DAYS)
*Location (Address): (Select Location where class will be conducted)	
Step 3: Payment Inform	
step 5. Payment Inform	lation
Please complete your payment information  Days before the Start Of Class. An email	n below. Note that EVMI® must receive full payment for course(s) registered 30 confirmation will be sent to you upon receipt of full payment including further art of class. Please there are no exceptions.
Please complete your payment information  Days before the Start Of Class. An email	n below. Note that EVMI® must receive full payment for course(s) registered 30 confirmation will be sent to you upon receipt of full payment including further art of class. Please there are no exceptions.
Please complete your payment information Days before the Start Of Class. An email of the nstructions. You must pay in full before start of the payment information of the payment infor	n below. Note that EVMI® must receive full payment for course(s) registered 30 confirmation will be sent to you upon receipt of full payment including further art of class. Please there are no exceptions.
Please complete your payment information Days before the Start Of Class. An email of nstructions. You must pay in full before start of Class. An email of the start of Class. An email	n below. Note that EVMI® must receive full payment for course(s) registered 30 confirmation will be sent to you upon receipt of full payment including further art of class. Please there are no exceptions.  ENT METHOD:
Please complete your payment information Days before the Start Of Class. An email on the Start of Class. An email of the Start of Class of the Start of Start o	n below. Note that EVMI® must receive full payment for course(s) registered 30 confirmation will be sent to you upon receipt of full payment including further art of class. Please there are no exceptions.  ENT METHOD:  URED PAYMENT GATEWAY AT
Please complete your payment information Days before the Start Of Class. An email on the Start of Class. An email of the Start of Class of the Start of Start o	n below. Note that EVMI® must receive full payment for course(s) registered 30 confirmation will be sent to you upon receipt of full payment including further art of class. Please there are no exceptions.  ENT METHOD:  URED PAYMENT GATEWAY AT  H.APP PAYMENT USING VENMO  UR SOFT COPY READ-AHEAD MATERIALS WILL BE EMAILED ELECTRONICALLY TO ALIAYMENTS AND COMPLETED APPLICATION FORMS HAVE BEEN RECEIVED.

Phone: +1. 469.920.4066 (USA) www.evmi.com/evmd Email: certification@evmi.com MAILING: EVMi, 8700 Stonebrook Pkwy, Number 1624, Frisco, Texas 75034 USA



NOTE: SCAN YOUR SIGNED AND COMPLETED REGISTRATION FORM AND SEND ALONG WITH YOUR YOUR MOST RECENT CV/RESUME & 2 PASSPORT SIZED PICTURES TO: certification@evmi.com

#### Step 4: Select your industry that you work in: (select only 1)

INDUSTRY	YES/NO	INDUSTRY	YES/NO
Aerospace & Defense		Heavy Construction	
Apparel		High Speed Rail & Railroads	
Automotive		Hospitality, Hotels & Tourism	
Aviation & Airlines		Housing & Real Estate	
Architecture		Heavy & Industrial Machinery	
Banking		Information Technology	
Beverages & Alcohol		Infrastructure	
Bio - Technology		Insurance	
Business Services		Luxury	
Chemicals		Manufacturing	
Computer Software		Management Consulting	
Computer Hardware		Materials	
Computer Networks		Media & Mass Communications	
Consumer & Packaged Goods		Medical Products	
Climate Change		Metals	
Cybersecurity		Mining & Drilling	
Education		Oil & Gas	
Electronics		Pharmaceuticals	
Energy & Nuclear Power		Printing & Publishing	
Environment		Retail	
Farm Machinery		Science & Life Sciences	
Film, Motion Picture, Entertainment		Shipping	
Financial Services		Ship Building	
Food Products		Space Systems & Space Technology	
Forestry		Sports Apparel & Sporting Goods	
General Merchandising		Telecommunications	
Government (Local & State)		Transportation & Logistics	
Government (Federal)		Renewables	
Health Care		Utilities	

Page 3

Phone: +1. 469.920.4066 (USA) <u>www.evmi.com/evmd</u> Email: <u>certification@evmi.com</u> MAILING: EVMi, 8700 Stonebrook Pkwy, Number 1624, Frisco, Texas 75034 USA



NOTE: SCAN YOUR SIGNED AND COMPLETED REGISTRATION FORM AND SEND ALONG WITH YOUR MOST RECENT CV/RESUME & 2 PASSPORT SIZED PICTURES TO: <a href="mailto:certification@evmi.com">certification@evmi.com</a>

<b>Step 5: Briefly Describe Your Current And Last Two Projects That</b>						
You Worked On In Your Industry (Include Duration)						
CURRENT PROJECT 1:	FROMTO					
PROJECT 2:	FROMTO					
PROJECT 3:	FROMTO					

Phone: +1. 469.920.4066 (USA) <u>www.evmi.com/evmd</u> Email: <u>certification@evmi.com</u>

MAILING: EVMi, 8700 Stonebrook Pkwy, Number 1624, Frisco, Texas 75034 USA



NOTE: SCAN YOUR SIGNED AND COMPLETED REGISTRATION FORM AND SEND ALONG WITH YOUR MOST RECENT CV/RESUME & 2 PASSPORT SIZED PICTURES TO: certification@evmi.com

**CREDIT CARD PAYMENTS POLICY VIA SECURED PAYMENT GATEWAY:** EVMi® accepts the following major credit cards for payment: VISA, Master Card, Amex and Discover. All credit card payments are processed online at <a href="https://www.evmi.com">www.evmi.com</a> EVMi® will send you an invoice with payment instructions and payment link which is located at: <a href="https://www.evmi.com/evmd">www.evmi.com/evmd</a>

**IDENTIFICATION FORMS REQUIRED:** 2 official forms of **PICTURE** identification are required for the **EVMD™ program** and must be presented before the start of class. All online participants must submit a notarized statement of proof of identity using the **EVMI Affidavit** Identity form at: https://www.evmi.com/wp-content/uploads/2018/06/EVMI Affidavit of Identity Form-3.pdf Accepted forms of identifications can include Military ID; Official country issued passport; Voters registration card; State issued ID; State issued Driver's License. Your identification must be current and you will not be allowed to sit for the class or exam if your identification has expired. All online participants must have their identification verified and submitted by a public authorized notary. PASSPORT SIZED PICTURES: All ONLINE participants must scan and send two (2 x 2) passport sized pictures in .jpeg format of your full front face taken not **more** than 30 days and must be included with your application.

**AIRLINE TICKETS & HOTELING:** Don't make non-refundable airline reservations/hotel arrangements for public site training unless you have received a confirmation e-mail that the class will be held. **EVMI®'s CANCELLATION POLICY:** Substitutions or registration sharing are not permitted. If you cancel your registration more than two weeks prior to the course start date, your full tuition will be refunded less processing fee of **\$250.00.** If you cancel less than two weeks prior to the course, you will be responsible for the full tuition and receive a transfer voucher. If you fail to attend the course without advanced notification, you will be responsible for full tuition.

**EVMI®'s INTELLECTUAL PROPERTY POLICY**: By registering for the **EVMD™ Earned Value Management Director™** program you FULLY acknowledge that ALL of EVMI® Earned Value Management Institute®'s training materials are protected by United States and international copyright laws. In addition, you agree not to use any content of EVMI®'s training materials, including the concepts and ideas expressed in the **EVMD™** program for purposes of training and distribution of competing products or services. Please sign below to confirm that you fully agree with EVMI®'s intellectual property and cancellation policy. By signing this application, you fully agree that all information provided in the completion of this **EVMD™** application form is true and accurate.

NAME IN FULL:	Page 5

SIGNATURE: DATE:

Phone: +1. 469.920.4066 (USA) www.evmi.com/evmd Email: certification@evmi.com

MAILING: EVMi, 8700 Stonebrook Pkwy, Number 1624, Frisco, Texas 75034 USA



NOTE: SCAN YOUR SIGNED AND COMPLETED REGISTRATION FORM AND SEND ALONG WITH YOUR MOST RECENT CV/RESUME & 2 PASSPORT SIZED PICTURES TO: <a href="mailto:certification@evmi.com">certification@evmi.com</a>

### Reminder:

PLEASE FULLY COMPLETE, SCAN AND SEND THE FIRST FIVE PAGES OF YOUR APPLICATION FORM, EVMI AFFIDAVIT OF IDENTITY FORM, SIGNED AND DATED, AND INCLUDE YOUR MOST RECENT RESUME OR CURRICULUM VITAE (CV) WITH TWO 2 x 2 PASSPORT SIZED PICTURES OF YOUR FRONT FACE IN JPEG (.JPG) FORMAT, AND EMAIL TO: <a href="mailto:certification@evmi.com">certification@evmi.com</a> FOR PROCESSING

**INCLUDE IN THE SUBJECT SECTION OF YOUR EMAIL:** EVMD Certification Application & Your Name

#### **ATTENTION:**

PLEASE COMPLETE ALL STEPS 1, 2, 3, 4 AND 5 ON THE APPLICATION FORM. THANKS

Page 6

Phone: +1. 469.920.4066 (USA) <u>www.evmi.com/evmd</u> Email: <u>certification@evmi.com</u>
MAILING: EVMi, 8700 Stonebrook Pkwy, Number 1624, Frisco, Texas 75034 USA