

MAILING: P. O BOX 1624 FRISCO TEXAS 75034 USA

USA & CANADA Toll free Phone Number: 1.855.400.3864

Email: certification@evml.com | Website: www.evml.com/evmp

*Approved PDUs List is at: http://www.evmi.com/evmi-pdus/
*You can only report completed Professional Development Units (PDUs) and not anticipated ones

EVMP EARNED VALUE MANAGEMENT PROFESSIONAL CERTIFICATION PROFESSIONAL DEVELOPMENT UNITS (UNITS) ACTIVITY REPORTING FORM

- Please Complete all Sections 1 - 5 and fields

Section 1:	Please complete all fields:
CONTACT INFORMATION ABOUT	i lease complete an fields.
YOU & YOUR EVMP CREDENTIAL	
CERTIFICATION	
*Your Credential Number as appears on your	
EVMP credential certification: *Your EVMP credential certification award date	
as appears on your FVMP credential certification:	
as appears on your EVMP credential certification: *Your EVMP credential certification Expiration	
date as appears on your EVMP credential	
certification:	
Last 4 digits of Your SSN (For USA Credential Holders Only -	
*LAST 4 Digits of Your SSN:	
(Your name is exactly what appears on your	
credential)	
*First Name:	
(Your name is exactly what appears on your credential)	
*Middle Name:	
(Your name is exactly what appears on your	
credential)	
*Last Name: * Current Job Title	
" Current Job Title	
*Mailing Address (Permanent):	
*City	
*State:	
*Zip Code:	
*Country (If Outside the USA):	
, , , , , , , , , , , , , , , , , , , ,	
*Work Telephone Number	
*Permanent Telephone Number/	
Cell Phone Number	
*FAX Number:	
*Work Email:	
*PERMANENT EMAIL ADDRESS: *Permanent email is where we can reach you in case you	
change jobs. Such as with a @gmail.com extension	
change jobs. Such as with a wightanteom extension	



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Section 2: PDU ACTIVITY INFORMATION					
PROVIDER NAME:					
ADDRESS:					
DATE(S) TAKEN:					
ACTIVITY DESCRIPTION:					
NUMBER OF PDUs:					
The Activity Met Its Stated Objectives (Please circle)	Outstanding 7 6	5	Average 4 3	2	Poor 1
Section 2: PDU ACTIVITY INFORMATION					
PROVIDER NAME:					
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DATE(S) TAKEN:					
ACTIVITY DESCRIPTION:					
NUMBER OF PDUs:					
The Activity Met Its Stated Objectives (Please circle)	Outstanding 7 6	5	Average 4 3	2	Poor 1



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Section 3: PDU ACTIVITY INFORMATION						
PROVIDER NAME:						
ADDRESS:						
DATE(S) TAKEN:						
ACTIVITY DESCRIPTION:						
NUMBER OF PDUs:						
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The Activity Met Its Stated Objectives (Please circle)	7 6	5	4	3	2	1
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Section 3: PAYMENT

The administrative cost to process your EVMP PDUs and renew and send you your renewed EVMP certification credential per Participant is \$299.00

Make your credit card payment of **\$299.00** via our secured PAYPAL payment gateway at: www.evmi.com/payment

Upon receipt of this signed and completed EVMP PDU Activity form we will re-issue you with a new EVMP certification credential that shows your newly updated Expiration date

Section 4: Passport sized pictures, Completed EVMP PDU Activity Form and scanned copy of your last issued EVMP certification

Send all 4 items listed below via email to Certification@evmi.com

- 1) Your proof of Payment of \$299.00 such as receipt
- 2) Two copies of your 2x2 Passport sized pictures in .jpeg format (Your certification is embossed with your Passport picture)
- 3) Scanned copy of your issued last EVMP credential certification
- 4) Completed and signed PDU Activity List form

Section 5: YOUR SIGNATURE:

By appending my signature to this form, I attest that all information that I have provided is true and accurate, and that any misrepresentation or misleading information may result in disciplinary action and can serve as grounds for revocation or suspension of my EVMi® certification credential.

Name in Full: (As appears on your EVMP credential certification)
Signature:
Date: