

**APIEM CERTIFIED EVENT COURSE APPLICATION FORM**

**return this form to contact@theapiem.com**

# Summary Information

|  |  |
| --- | --- |
| **Name & Title** | Name |
| **Address**  | Details |
| **Occupation and position/job title** | Details |
| **E-mail address** | Details |
| **APIEM Certified Event Course being Applied for – please specify** | Details |

# Applicant information

|  |  |
| --- | --- |
| **Career History – specify names/addresses of employers, dates of employment and job roles** | Details |
| **Education Qualifications – specify names of higher educational institutions attended, qualifications achieved** | Details |
| **Events Management experience – specify the educational and/or work experience you have gained in the events industry** | Details |

# Recommendation – to be completed by APIEM

|  |  |
| --- | --- |
| **I recommend that the proposed applicant is eligible to enrol for an APIEM Certified Events course**  | Details |
| **Comments** | Details |

1. **SIGNED DATE**

**Professor David Hind, President, APIEM**