Updating form for SPM Certified Project Manager (CPM)

Personal Particulars

|  |  |  |  |
| --- | --- | --- | --- |
| Surname: | Given Name: | | Date of Birth: |
| NRIC/Passport No.: |
| Nationality: | Telephone No.: | | Mobile No.: |
| Residence Address: | | Personal Email: | |

**Employment**

|  |  |  |
| --- | --- | --- |
| Name of Present Employer: | | Office Telephone: |
| Business Type:  Developer  Consultant  Builder  ☐ Institution ☐ Contractor  ☐ Others: (please state): | Practice Type:  Architect  Engineer (C&S)  Engineer (M&E)  Planner  Project Manager  Quantity Surveyor  ☐ Others: (please state): | |
| Business Email: | | |
| Business Address: | | Current Job Title: |
| Date of Appointment: |

|  |
| --- |
| Preferred Mailing Address:  Residence Address  Business Address |

**Update of Academic Qualifications (if any)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title of Qualification (if any) | Name of Awarding Institution | Year of Award | Duration of Program | Mode of Program |
|  |  |  |  | Full Time  Part Time |

**Update of Professional Affiliations (if any)**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Professional Body | Type of Membership | Grade of Membership | Period of Affiliation |
|  |  |  |  |
|  |  |  |  |

**For Candidates from Tertiary Institutions**

|  |  |
| --- | --- |
| Name and Address of Institution: | Date Joined Institution: |
| Duration at Institution: |
| Title of Research Paper or Book relevant to Project Management: | Year Published/Presented: |
| Brief Description on the Objective of the Paper: | Name of Journal/Conference |
| Author(s) of the Paper: | |
| Remarks (Describe here any special achievements of the paper, particularly those attributable to the applicant) | |

**Teaching Experience**

* Please list the subject(s) that you are teaching or had taught that are relevant to Project Management.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title of Subject(s) | Name of Institution | Period of Involvement | | Hours of lectures |
| From | To |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Consent & Declaration**

By providing your personal particulars in the form, you are allowing SPM to use the data to communicate with you and for all SPM related activities.

I hereby certify that information furnished hereinabove and, in the Form are true and accurate to the best of my knowledge. There should be no false claim or misleading information.

|  |  |
| --- | --- |
| Signature of Applicant: | Date: |

**Instructions**

Please submit the completed form and documents via either of the following:

**Email Address**

[apm@spm.sg](mailto:apm@spm.sg)

**Mailing Address**

Society of Project Managers

Macpherson Road P.O. Box 1083

Singapore 913412

**Enquiries**

For enquiries, please contact at (65) 6748 8306 or email [apm@spm.sg](mailto:apm@spm.sg)