

# **CAPM®**

# **Application**

# **Walkthrough**

**Version: 1.0**

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**Source: [certification.pmi.org](https://certification.pmi.org)**

# Step 1: Application > Contact Address

## CAPM Application – Step 1: Application

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### Add/Edit Address [Help ?](#)

\* Description:   
e.g. My Home

Organization:

\* Country:

\* Address:

\* City:

\* State/Province/Territory:

\* Zip/Postal Code:

\* indicates a required field

- Enter all required fields.
- Click **Save**

# Step 1: Application > Contact Information

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### Contact Information

Help ?

Enter at least one E-mail address and phone number, then choose your preferred contact information.

E-mail Addresses

At least one e-mail is required

ADD E-MAIL

Phone Numbers

At least one phone number is required

ADD PHONE NUMBER

BACK

SAVE AND CONTINUE

- Click **Add E-mail** to enter E-mail Address.
- Click **Add Phone Number** to enter Phone Number.

# Step 1: Application > Contact Information > Add Email

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### Add Email

[Help ?](#)

Your e-mail address is PMI's primary method for contacting you. You will not be able to receive eligibility and other critical notifications unless you provide a valid e-mail address.

\* E-mail Address:

\* indicates a required field

[CANCEL](#)[SAVE](#)

- Enter **E-mail Address**.
- Click **Save**.

# Step 1: Application > Contact Information > Add Phone Number

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### Add Phone Number

[Help ?](#)

Phone Type:

Work

\* Country Code:

Area/State/City Code:

(required for Country Code: 1; USA and CAN)

\* Phone Number:

Extension:

\* indicates a required field

CANCEL

SAVE

- Enter the phone number details.
- Click **Save**.

# Step 1: Application > Contact Information > Completed

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### Contact Information

Help ?

Enter at least one E-mail address and phone number, then choose your preferred contact information.

E-mail Addresses

✖ capmstudent@example.com (preferred)

ADD E-MAIL

Phone Numbers

✖ Cell 1 987 6543210 (preferred)

ADD PHONE NUMBER

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SAVE AND CONTINUE

- Click **Save and Continue**.

# Step 1: Application > Attained Education

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### Attained Education

Help ?

Indicate your highest level of education attained at this time. Complete all applicable contact information for your school, college, or university.

\* Highest Degree Attained:

High School Diploma

?

\* Year degree awarded:

2015

\* School/University:

School

?

\* Field of Study:

Accounting

?

\* Country:

United States

\* Address:

Some Street

\* City:

Some City

\* State/Province/Territory:

California

\* Zip/Postal Code:

\* indicates a required field

BACK

SAVE AND CONTINUE

- Enter education details.
- Click **Save and Continue**.

# Step 1: Application > Requirements > Overview

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### CAPM Requirements Overview

Help ?

Based on the information you have provided us, you must meet the following requirement to be eligible to sit for the examination:

#### Project Management Education

Minimum of 23 project management education hours

In the next section we will be asking you to document your project management education to meet the requirement.

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SAVE AND CONTINUE

- Review the requirements.
- Click **Save and Continue**.



# Step 1: Application > Requirements > PM Education > Education Overview

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### Education Overview

Help ?

Use the worksheet to document your training in project management. Start with your most recent and verifiable courses. Once you have fulfilled the requirement, additional entries will not be permitted.

**EDUCATION SUBMITTED**

Course	Hours
<b>Total:</b>	0.00
<b>Required:</b>	23.00
<b>Still Need:</b>	23.00

ADD

BACKSAVE AND CONTINUE

- Click on **Add**.

# Step 1: Application > Requirements > PM Education > Add Education

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### Add Education [Help ?](#)

Please enter your project management education information below. Specify the number of hours that qualify from the course being documented that are applicable to the credential you are applying for.

* Course Title:	<input type="text" value="CAPM PRO"/>
* Institution Name:	<input type="text" value="BRAINBOK CO."/>
* Course Start Date:	<input type="text" value="2/1/2020"/> e.g. 1/28/2020
* Course End Date:	<input type="text" value="5/30/2020"/> e.g. 1/28/2020
* Hours:	<input type="text" value="28"/>
* Qualifying Hours:	<input type="text" value="23"/>

**NOTE:** Qualifying hours are hours that are applicable to this credential only.

\* indicates a required field

CANCEL

SAVE & ADD

- Enter the course details.
- Click on **Save & Add**.

# Step 1: Application > Requirements > PM Education > Education Overview > Education Submitted

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Education Overview

Use the worksheet to document your training in project management. Start with your most recent and verifiable courses. Once you have fulfilled the requirement, additional entries will not be permitted.

EDUCATION SUBMITTED

Course	Hours	
CAPM PRO BRAINBOK CO., 2/1/2020 - 5/30/2020	23.00	✗
Total:	23.00	
Required:	23.00	
Still Need:	0.00	

ADD

BACK

SAVE AND CONTINUE

- Verify the education details.
- Click **Save and Continue**.

# Step 1: Application > Optional Information

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### Optional Information

Help ?

The following questions are optional, and you may choose not to answer them.

Primary Referral Source: 

Personal Development

Have you taken a Certification Preparation Course presented by a PMI Chapter? 

No

\* indicates a required field

BACK

SAVE AND CONTINUE

- Enter the requested information if you want (optional).
- Click **Save and Continue**.

# Step 1: Application > Certificate

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### Certificate

Help ?

Enter your name **exactly** as it should appear on your certificate. This does not have to match your government issued ID.

\* Name on certificate:

CAPM STUDENT

\* indicates a required field

BACK

SAVE AND CONTINUE

- Enter the name to be printed on the CAPM Certificate, which you will receive after passing the CAPM certification exam.
- Click **Save and Continue**.

# Step 1: Application > Certificate > Confirm Name

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### Certificate

Help ?

Confirm that this is the name that you would like to appear on your certificate.

This is exactly how it will appear:

**CAPM STUDENT**

\* indicates a required field

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SAVE AND CONTINUE

- Confirm the name to be printed on your CAPM Certificate.
- Click **Save and Continue**.

# Step 1: Application > Agreement

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### Agreement

[Help ?](#)

#### PMI CERTIFICATION APPLICATION/RENEWAL AGREEMENT

By clicking the "I Agree" box below, you represent and agree to the following terms, conditions and releases related to PMI's Certification Programs:

1) I agree to satisfy and conduct myself in accordance with all PMI certification program policies and requirements, including this Agreement, [the CAPM Handbook](#), and the [PMI Code of Ethics and Professional Conduct](#) (as they may be revised from time to time); and I shall maintain confidentiality of PMI examination questions and content. Furthermore, I agree not to discuss, debrief or disclose, in any manner, the specific content of PMI examination questions and answers, to any individual.

2) I agree that I shall at all times act in a truthful and honest manner and provide truthful and accurate information to PMI. I agree that any intentional or unintentional failure to provide true, timely and complete responses to questions in this application or renewal form may lead to further investigation and/or sanctions by PMI. I also agree to promptly report to PMI any possible violations of the terms of this Agreement or the PMI Code of Ethics and Professional Conduct by PMI members or by persons who have applied for a PMI credential or have been awarded a credential by PMI.

3) I agree to notify the PMI Certification Department in a timely manner of changes concerning the information I have provided, including my current address and telephone number.

4) I have reported, and will continue to report, to the PMI Certification Department, within sixty (60) days of occurrence, any matters, proceedings, lawsuits, settlements and/or other agreements, administrative agency actions, or organizational actions relating to my profession or occupation, including all complaints relating to my professional activities as a project management practitioner, and matters or proceedings involving, but not limited to certification, credentialing, malpractice, disciplinary ethics or similar matters. I also agree to promptly report, within sixty (60) days of occurrence, any felony criminal charges, convictions, or plea agreements or other criminal charges, convictions, or plea agreements relating to acts of dishonesty or unethical conduct.



- 5) I agree that if my compliance with any of the terms of this agreement requires or includes an explanation and supporting documents, I will provide a complete and accurate explanation and true copies of the materials to the PMI Certification Department with this application.
- 6) I agree that the PMI Certification Department has the right to communicate with any person, government agency or organization to review or confirm the information in this application or any other information related to my application for PMI credentialing. Further, I agree to and authorize the release of any information requested by the PMI Certification Department for such review and confirmation.
- 7) I agree that the PMI credential status does not imply licensure, registration or government authorization to practice project management or to engage in related activities.
- 8) I agree that all materials that I submit to the PMI Certification Department become the property of the PMI Certification Department, and that the PMI Certification Department is not required to return any of these materials to me.
- 9) I agree that upon achieving the PMI credential, my name may be posted on the PMI website as part of an Online Registry to be created and maintained by PMI.
- 10) I agree that information related to my participation in the PMI certification process may be used in an anonymous manner for research purposes only.
- 11) I agree that all disputes relating in any way to my application for a PMI credential and/or my involvement generally in a PMI certification program, will be resolved solely and exclusively by means of PMI Certification Department policies, procedures and rules, including the Appeals Process.
- 12) I certify that I am legally eligible to seek certification from PMI, and that I am not on any list of designated parties maintained by the US government, including but not limited to the List of Specially Designated Nationals and Blocked Persons, nor am I in anyway affiliated with the governments of countries to comprehensive US sanctions, currently Iran, Sudan, Syria and Cuba, nor am I ordinarily or permanently resident in Syria or Cuba.
- 13) PMI reserves the right to suspend or revoke the credential of any individual who is determined to have failed to uphold, or otherwise breached this Agreement, or committed a violation of the PMI Code of Ethics and Professional Conduct.
- 14) I release and indemnify PMI and the PMI Certification Department from all liability and claims that may arise out of, or be related to, my project management and related activities.
- 15) I hereby release, discharge and indemnify PMI, its directors, officers, members, examiners, employees, attorneys, representatives, agents and the PMI Certification Department from any actions, suits, obligations, damages, claims or demands arising out of or in connection with this application, the scores given with respect to the examination or any other action taken by PMI with regard to credentialing, testing and professional development including, but not limited to, all actions related to ethics matters and cases. I understand and agree that any decision concerning my qualification for any credential, as well as any decisions regarding my continuing qualification for any credential and my compliance with the PMI Code of Ethics and Professional Conduct, rest within the sole and exclusive discretion of PMI, and that these decisions are final.

This Agreement may be updated or revised from time to time. For the most current information, please refer to the online version of the credential handbooks located in the Certification Program section of PMI's website at <https://www.pmi.org/certifications/types>.

☐ I Agree\*

\* indicates a required field

BACK

SAVE AND CONTINUE



- Read the agreement.
- Check the **I Agree** checkbox (assuming you agree).
- Click **Save and Continue**.

# Step 1: Application > Review and Submit

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### Review and Submit

Help ?

The following is a summary of your application's status. When each category is marked complete and you have checked the underlying box you will be able to submit your application to PMI for review and approval.

Category	Status
Contact Information	Completed ✓
Attained Education	Completed ✓
Requirements	Completed ✓
PM Education	Completed ✓
Certificate Details	Completed ✓
Code of Conduct	Completed ✓

☐ All information that I have provided is accurate and complete. \*

\* indicates a required field

Download Application

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SUBMIT APPLICATION

PMI, the PMI logo, PMBOK, PfMP, PgMP, PMP, PMI-PBA, PMI-RMP, PMI-SP, the PMP logo, and CAPM are marks or registered marks of the Project Management Institute, Inc.

- Click **Back** and review all the information again.
- Click the checkbox (All information that I have provided is accurate and complete) to confirm the details.
- If you are ready to submit the application, click **Submit Application**.

**Congratulations! You have just taken your first step toward achieving the coveted **CAPM Certification**.**