



Court Services



CMM Supplemental Application

A. Court Professional

- | | Completed | **Documented |
|--|--------------------------|--------------------------|
| 1. 6 x days of professionally related training and/or development events (minimum 36 hours) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Employment Experience 2 years, direct experience delivering Court administration functions | <input type="checkbox"/> | <input type="checkbox"/> |

Title: _____ Employer: _____ Month __ Year __ to Month __ Year __ *

** Documented: include copies of certificates/diplomas, agendas/transcripts where possible with CMM Application * Provide detail if additional positions

B. Court Executive (above requirements and CMM II level)

- | | Completed | **Documented |
|---|--------------------------|--------------------------|
| 1. 3 x Municipal Court Managers' Association Annual conferences in previous five-year period. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. 3 x years membership, in good standing, in MCMA | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. 50 x hours participation to MCMA Board or Committees in previous two years. | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. 12 x days of professionally related seminars/conferences (total of 72 hours) | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Employment Experience: 3 years as the <u>Senior</u> Court Official with management responsibility of the operation of one or more Provincial Offences Act (POA) court locations.
(The title in many municipalities may be Court Manager, Court Administration Manager, POA Manager, POA Coordinator, Director. The incumbent must be a senior person responsible for day to day operations & service delivery at one or more POA court locations pursuant to the Transfer Agreement MOU under Part X of the POA) | <input type="checkbox"/> | <input type="checkbox"/> |

Title: _____ Employer: _____ Month __ Year __ to Month __ Year __ *

Note: Re-Certification Requirement Attend two **MCMA** conferences every three years to maintain the **Executive** level

** Documented: include copies of certificates/diplomas, agendas/transcripts where possible with CMM Application * Provide detail if additional positions

C.



**New applicants must attach their CMM Application
Complete all sections for accurate evaluation**



1. Applicant: _____ Employer: _____
2. Phone : _____ E-mail : _____
3. Signature : _____ Date : _____
4. **MCMA** Member Yes No ****MCMA Membership Required for Executive level****
5. Witness: **MCMA** Member: _____
Signature: _____ Title: _____

* Witness identity only – not verification of content

Fee: \$235 (includes CMM & **MCMA** enhancement) HST Exempt

Cheque payable to OMMI or pay by VISA _____ Exp __ / __ Name on Card: _____ Corp Personal

Mail/Courier application to 618 Balmoral Drive, Oshawa, ON L1J 3A7

Office Use