Court Services

CMM Supplemental Application

Office Use

A. Court Professional

Completed **Documented

1. 6 x days of professionally related training and/or development events (minimum 36 hours)
2. **Employment Experience** 2 years, direct experience delivering Court administration functions

Title: _____ Employer: _____ Date: _____ to _____

*** 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.
2. 3 x years membership, in good standing, in MCMA
3. 50 x hours participation to MCMA Board or Committees in previous two years.
4. 12 x days of professionally related seminars/conferences (total of 72 hours)
5. **Employment Experience:** 3 years as the Senior 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)

Title: _____ Employer: _____ **Date:** _____ **to** _____

****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: $255 (includes CMM & MCMA enhancement) HST Exempt

Cheque payable to OMMI or pay by Credit Card __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ **Exp** **CVV:** _____ **Corp** **Personal**

Name on Card: _____

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

Jan 2020