

Certified Public Works Professional – Management (CPWPM) Exam Application

Part A: Candidate Information (Print or type the requested information.)

_____	_____	_____
First Name	MI	Last Name
_____		_____
Employer	Job Title	
_____		_____
Preferred Address		City
_____	_____	_____
State/Province	Postal Code	Country
This is my: Office Home		
_____		_____
Preferred Email	Preferred Phone Number	

Part B: Exam Date Selection

Exams are administered via computer at your place of employment, or designated testing center

Please see the attached exam schedule. Dates are subject to change based on business needs. Please visit our certification page at www.apwa.org confirm availability prior to submission.

In the event you encounter technical issues; support is available from 8:00am to 4:30pm CST. We are not able to guarantee availability outside of normal works hours.

All applications must be submitted no less than 30 days prior to your preferred exam date.

_____	_____
Preferred exam date	Estimated Fee

Exam dates will fall on the following dates:

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Part C: Test Delivery

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