



CMHS[®] APPLICATION FORM

Certified Master Hotel Supplier

Ref Code:

APPLICATION CHECKLIST

Have you included the following required documents?

- Completed CMHS application form
- Current Resume
- Job Description
- Employment Verification Form (signed by your immediate supervisor)
- Payment

SECTION 1

To be accepted as a candidate in the Certified Master Hotel Supplier program, you must currently hold a position as a supplier of products or services to the hospitality industry.

Please indicate area of specialization (check one only).

- Food & Beverage
- Supplier

Please send all correspondence regarding the CMHS program to my:

- Home Address
- Business Address

SECTION 2

PERSONAL AND PROFESSIONAL DATA (Correspondence will be sent to your business address unless otherwise indicated.)

PRINT Name (Mr./Ms./Mrs.)		Birth Date	FOR OFFICE USE ONLY
Home Mailing Address			
City/State or Province		Postal Code/Country	
Business Phone ()	Home Phone ()		
Business Fax ()	e-mail		
			Customer #
			Payment/check #
		Order #	Enrollment Date

PRESENT POSITION		When did you begin? (month/year)	Supervisor's Name
Company/Property			
Mailing Address			Supervisor's Phone ()
City/State or Province		Postal Code/Country	Property/Company Size
Property Affiliations (chains, referral groups, management companies; include brochure if possible)			

SPECIAL ACCOMMODATIONS

The Certification Commission supports the intent of the Americans with Disabilities Act (ADA). If you require special assistance during the certification examination, check the box below. Submit appropriate documentation substantiating your disability with this application. Call the Professional Certification Department at +1-407-999-8100, if you have any questions.

- I request special examination assistance or a test modification during the examination due to a disability. With this application, I am including documentation of my disability in order to receive special accommodations.

Auxiliary aids and services can only be offered that do not fundamentally alter the measurement of skills or knowledge the examination is intended to test – Americans with Disabilities Act, Public Law 101-334 §309(b)(3)

Return application to: American Hotel & Lodging Educational Institute
Professional Certification Department

6751 Forum Dr., Suite 220, Orlando, FL 32821

For any questions: Phone: +1 407 999 8100 or 1 888 575 8726 | Fax: +1 407 999 8610 or +1 407 236 7848

E-mail: certification@ahlei.org

Continue to Sections 3-5.

SECTION 3 – FEES/PAYMENT

The CMHS certification program fee is U.S. \$150 for employees of AHLA/Allied member properties in the U.S./Canada; U.S. \$400 for employees of non-AHLA/Allied member properties and all properties outside the U.S./Canada. If for some reason, you do not meet the requirements, your program fee will be returned in full. If for any reason you do not complete your certification within six months after acceptance into the program, your program fee is forfeited. Upon acceptance into the program, fees are non-refundable and non-transferable. (*Prices are subject to change without notice; State taxes may be applicable.*)

This fee includes:

- Exam Preparation Material for the Certified Master Hotel Supplier program.
- Application and Exam Fee.
- Certificate, Lapel Pin and the CMHS Designation for candidates **who successfully pass the certification exam.**

At this time my company is a member of the American Hotel & Lodging Association (AHLA):

No Yes If yes, provide Member Number (if available): _____

My check or money order is enclosed, made payable in U.S. funds drawn on a U.S. bank to: **NRA Solutions.**

Please bill my credit card: Visa Mastercard American Express Discover Card

Account Number _____ CVV2 Security Code _____ Expiration Date _____

Billing Address _____

Cardholder Signature _____ Print Name _____

SECTION 4 – THE CMHS EXAMINATION

To take the CMHS examination, we require you to arrange for a proctor to administer the exam to you. A proctor may be a CHA or CMHS, a hospitality educator, an AHLA member association/federation executive, or a member of the clergy. (A relative or person with the same last name cannot be accepted as a proctor.) Please obtain consent from this individual *before* submitting his or her name. Your examination will be sent to your proctor upon your request, the proctor must be present when taking the exam. If you have not yet chosen a proctor, write in this field "will call when ready."

Please select one: Online Exam (Results received immediately after completing online exam)

Paper-Based Exam (Allow more time for processing of results)

PROCTOR INFORMATION

Name (Mr./Ms./Mrs.)		Title
Organization		Business Phone ()
Address		Business Fax ()
City/State or Province	Postal Code/Country	e-mail

SECTION 5 – CERTIFICATION AGREEMENT

Please read the following Certification Agreement and sign and date it at the bottom. We must have your signature below to process your application.

The information I have provided is accurate. I understand that acceptance into the CMHS program is based on this application, any support materials I have enclosed, and a favorable recommendation from my reference. I give the Educational Institute permission to thoroughly investigate my past employment, education, and professional development activities. I release from liability all persons and companies supplying such information. I indemnify all persons I have listed in this application against any liability which might result from such an investigation. If I am accepted as a CMHS candidate, I will have **one year** to complete all program requirements. If I do not complete the program within **one year** I will have to re-apply and submit all fees. I agree to hold the Educational Institute and its Certification Commission harmless from any and all liability in the event this application is rejected on the basis of the information furnished by me or third persons which would, in the judgment of the Educational Institute, make me ineligible for certification. I agree to accept the Certification Commission's decision as to my eligibility for this certification.

The CMHS program and fees associated with the program are non-refundable and non-transferable.

Signature: _____ Date: _____

Print Name: _____



CMHS[®] RECOMMENDATION AND EMPLOYMENT VERIFICATION FORM

Certified Master Hotel Supplier

PLEASE TYPE OR PRINT CLEARLY.

The Certified Master Hotel Supplier (CMHS) designation recognizes those individuals who have demonstrated exemplary leadership and managerial abilities as a hospitality supplier. Those who earn the CMHS are seen as highly competent, respected professionals who are knowledgeable in their positions.

Please complete the information below on behalf of the individual applying for certification. Acceptance into the CMHS program is contingent on verification of employment. The applicant has been directed to give this form to an immediate supervisor or corporate representative.

(Note: AHLEI's Certification Department will not accept verification statements from relatives of potential certification candidates.)

I verify that	(name)		
has been employed with	(property or company)		
in the position of	(title)		
for the period of	(month/year)	through	(month/year)
His/Her responsibilities include:			
Additional comments:			

Based on the applicant's experience and competence:

- I attest that the above information is true and understand that any misinformation provided will affect the candidacy of stated CMHS applicant. I will, if called upon, answer any questions regarding the employment of the stated CMHS applicant.

Signature:		Date:
Your Name (Mr./Ms.):		
Title:	Property:	
Address:	City:	
State or Province:	Country:	Zip/Postal Code:
Business Telephone: ()	Fax: ()	e-mail

THIS COMPLETED FORM MUST ACCOMPANY THE CMHS APPLICATION

Certified Master Hotel Supplier (CMHS[®]) Program

When You Apply

When you apply for certification, it is important that we receive an updated resume with your application, and current job description, and other supporting documents which will help ensure that your application is processed quickly and correctly. All applications and supporting documentation become the property of the Educational Institute.

The CMHS Recommendation and Employment Verification Form should be completed by your immediate supervisor or the appropriate corporate representative and returned to the Educational Institute. If your immediate supervisor or corporate representative is a relative, we will accept a designated CHA or CMHS as a reference.

Eligibility and Your Candidacy Status

The Educational Institute, on behalf of the Professional Certification Department will review your materials to determine your eligibility. You will receive written notification within three weeks of receipt of your application. Upon approval, you will become a candidate for professional certification.

If your application is not accepted, for any reason, you will be notified in writing and your (application/examination) fee will be refunded. If you wish, you may appeal in writing to the Certification Commission Appeals Committee. Please submit your original application, all supporting documentation, and a letter outlining the reasons for reconsideration. The Committee will review your appeal and respond in writing.

Preparing for Your Exam

A number of optional resources are available to help you prepare for the CMHS comprehensive examination:

- **CMHS Study Guide:** This easy-to-use guide, included with your enrollment, offers a thorough overview of the exam material, as well as practice questions.
- **Educational Institute textbooks and courses:** Textbooks and courses on a variety of subjects are available for purchase through the Educational Institute. Call the Institute at +1-800-752-4567 for ordering information.

Exam Options

We require you to arrange for a proctor to administer the certification exam to you. An approved proctor may be a CHA or CMHS, an AHLA member association/federation executive, a hospitality educator, or a member of the clergy. A relative cannot act as your proctor.

- **CMHS Review Sessions:** These give you the opportunity to participate in an informally led review workshop. Call the Professional Certification Department for a list of the review classes currently scheduled or visit our website at www.ahlei.org/certifcalendar. (Test sessions may be cancelled or postponed due to low enrollment. There may be a nominal fee paid to the sponsor for attending a test site program.)

Proctored exams require you to arrange for a proctor to administer the certification exam to you. An approved proctor may be a CHA or CMHS, an AHLA member association/federation executive, a hospitality educator, or a member of the clergy. A relative cannot act as your proctor.

Your Test Results

A passing score is 70 percent or better. To guarantee your privacy, **absolutely no scores will be given over the phone.** Your exam results will be mailed directly to you, along with a written assessment.

The CMHS Exam Retake Policy

If a successful score is not achieved during the first attempt, candidates will be provided two additional opportunities to complete the requirement. For each retake, a fee of US \$50.00* will be charged and must be paid prior to the examination being sent. If a successful score is not achieved after three attempts, the enrollment will be discontinued and the individual will then be able to re-apply and submit all fees in order to continue pursuing the certification.

For Candidates with Special Needs

The Certification Commission heartily supports the intent of the Americans with Disabilities Act (ADA) PL 101-334 §309(b)(3). The Commission will make a reasonable effort to provide candidates who have documented disabilities with the necessary aids and services that do not fundamentally alter the measurement of the skills or knowledge the CMHS Program is intended to test. Please direct specific questions regarding special accommodations to the Professional Certification Department at +1-407-999-8100 or +1-888-575-8726.

Recertification:

Your Key to Ongoing Professional Growth

Every five years the Certification Commission will recertify you based on your continuing work experience and ongoing professional-development activities. Every time you fulfill the five-year recertification requirements, you will receive a new jeweled lapel pin – with additional jewels added to reflect your years of industry service – and a new certificate, signifying your continuing commitment to hospitality excellence. (The recertification fee is US \$200.00*.)

Policy Questions?

We will be happy to answer any questions you might have. Call the Educational Institute's Professional Certification Department at +1-407-999-8100 or +1-888-575-8726 or fax +1-407-999-8610 or +1-407-236-7848.