



# 2021 Returning Examiner Application

**Submit applications and direct questions**

**to:** Holly Bender, Recognition Program Manager

[hbender@imec.org](mailto:hbender@imec.org)

309.235.5204

**Online Application:**

[imec.org/excellence](http://imec.org/excellence)

1501 W. Bradley Ave | Peoria, IL 61625 | 888.806.4632 | [www.imec.org](http://www.imec.org)

Application Deadline: April 15, 2021

**Section I. Contact Information**

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Preferred Name for Certificate: \_\_\_\_\_

Work or Primary Email Address: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Work Home Mobile

Alternate Email Address: \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_ Work Home Mobile

Home Address Line 1: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Approximately how many total years have you served as an examiner (*including other states and/or National experience*): \_\_\_\_\_

**Section II. Employment Information**

Employment Status: Full-Time Part-Time Retired Unemployed

Employer: \_\_\_\_\_ Sector: \_\_\_\_\_

Position Title: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Manager's Name/Title: \_\_\_\_\_

Manager's Signature: \_\_\_\_\_

Manager's Email Address: \_\_\_\_\_

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**Section III. Examiner Preferences**

Organization Sector Preferences (*select as many as applicable*):

Business		Government		Nonprofit	
Education: Pre-K – 12		Health Care		Service	
Education: Post-Secondary		Manufacturing		Small Business	

Category Preferences (*select as many as applicable*):

Category		Category	
Leadership		Workforce	
Strategic Planning		Operations	
Customers/Patients/Students		Organizational Results & Data	
Information and Knowledge Management			

**Section IV. Examiner Training Courses**

Please select the Examiner Training options you prefer.

Choose	Training	Date	Location
	Senior Examiner Training <i>(by invitation only)</i>	April 21, 2021	Virtual
	New Examiner Training <i>(Optional for 2nd/3rd year examiners)</i>	May 17-18, 2021	Virtual
	Examiner Training <i>(Required)</i>	May 24-25, 2021	Virtual

**Section V. Site Visit Availability**

Site visits run Sunday through Friday. Please rank your preferred weeks for site visit. **Please hold these weeks until site visit details are finalized.**

Ranking		
1=1 <sup>st</sup> choice	2=2 <sup>nd</sup> choice	3=3 <sup>rd</sup> choice
August 15 - 20	August 22 - 27	August 30 – September 3

**Section VI. Registration Fees & Payment Information**

Registration Fees are due and payable the day before training begins. To request an invoice, send an email to: [sshrum@imec.org](mailto:sshrum@imec.org). You may call Shannon Shrum at 309-677-3931 to pay by credit card.

*To submit payment by check:* IMEC Recognition Program, Attn: Shannon Shrum, 1501 W. Bradley Ave, Peoria, IL 61625

**Fees**

Second & third year examiners: \$500.00 (Includes New Examiner Training 5/17-18 if desired)

Fourth year and beyond: No Fee

**By signing, applicant agrees they have read and agree to abide by the Code of Ethical Standards & Conduct and the IMEC Recognition Program Examiner Guidelines.**

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Signature of Examiner Applicant

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Date

*After completion, print form, sign, obtain manager's signature, and email to [hbender@imec.org](mailto:hbender@imec.org).*