Application form

APM Academic Accreditation

Association for Project Management

Please read the guidance notes and refer to these when completing the application.
Please complete the sections below and return to accreditation@apm.org.uk

Section 1: Your details

Name of teaching institution

Faculty

Department/division

Name of course/module to be accredited

Contact details of person to whom all correspondence should be addressed

Title	First name
	Surname

Institution name

Institution address

	Country	Postcode
Tel		Mobile

Email

Section 2: Your course

Start date (MM/YYYY) /	Duration

Location(s) of delivery

Mode of delivery

If this course is being delivered internationally, please confirm the same quality standards apply (If no please provide further details)	Yes ☐	No ☐

Name of external validating authority

Date of external validation   (DD/MM/YYYY)   /   /

Date of internal validation   (DD/MM/YYYY)   /   /

Candidate admission requirements

Have there been any significant changes at any point during the lifetime of this course, module or framework? (If yes, please advise the date and detail of those changes)   Yes   No

Section 3: APM engagement

Please state how you will promote engagement with us to your students

Section 4: Evidence map

Using the evidence map below please show the topic areas of the *APM Body of Knowledge* to be covered. (Please note, supporting evidence will need to be provided - for further information please see the application guidance)

APM Body of Knowledge reference	Page reference in accompanying documentation

e.g.
1.2 Life cycle options and choices
    1.2.1 Life cycle philosophy
    1.2.2 Linear life cycles
	e.g.
	module 1.2 slides 3-6, course material pages 27-35
	module 2.1 slides 35-38
	module 8 lecture 2 slides 5-9.

APM Body of Knowledge reference	Page reference in accompanying documentation

| *APM Body of Knowledge* reference | Page reference in accompanying documentation |

Section 5: Data protection and preferences

Data protection We look after your data carefully; please ask for our privacy policy or go to: **apm.org.uk/apm-privacy-statement** for more detail. We'd like to send you information about us, project management and our products and services.

You can tell us how you'd like to receive information online or by calling us, and opt out at any time:

☐ **Yes please** – I'd like you to keep me up to date (check the box)

☐ **No thanks** – only send me essential information (check the box)

☐ Please tick to confirm that you give permission for APM to display your organisation's logo across APM's social and paid media channels, website, offline print, and for any other marketing purposes. Please note that we'll only reference your logo when referring to our Academic Accreditation. If you consent to the use of your organisation's logo, please email a JPEG or PNG to **brand@apm.org.uk**.

Section 6: Declaration

☐ I have read and understood the APM Academic Accreditation Guidance Notes (check the box).

On behalf of _____ I apply for accredited status of our course/ module as described in this application.

We will publish your accredited status on our website.

Please check this box if you don't want this. ☐

Name	Position

Signature (please type your signature in here)	Date (DD/MM/YYYY) / /

We are the only chartered membership organisation for the project profession

Completed forms to:

accreditation@apm.org.uk

For queries regarding Academic Accreditation, please contact the Accreditation Department: Tel: 0845 4581944 or Email: accreditation@apm.org.uk

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