



Ohio Certified Emergency Manager Renewal

OCEM awardees must renew their certification every three years by submitting the following:

Work and Professional Experience

During the preceding three years:

- Evidence of continuous emergency management experience;
- Participation in one functional or full scale exercise or actual emergency that required the opening and staffing of an EOC and continuous operation for a four hour period.

Education and Training Requirements

During the preceding three years:

- 20 continuing education units (CEU's) or 200 contact hours of continuing education in emergency management related subjects

Note: The award of an Associate Degree or higher in Emergency Management or related field during the previous three years will satisfy the continuing education requirement

Contributions to the Field

During the preceding three years:

- One contribution to the field through membership in emergency management related professional organization (e.g. IAEM, etc.), teaching, published professional articles, etc.

Please send application and supporting documentation by December 31st of the year prior to your OCEM expiration to:

Emergency Management Association of Ohio
88 East Broad Street, Suite 1305
Columbus, Ohio 43215
(614) 378-2156 office
email: michelle@fitzgibbongroup.com

Renewal Fee:

EMA Member \$50

Non-Member \$100

Applicant's Contact Information

Name:		
Current Position:	Title:	
Address:		
City:	State:	Zip:
Phone:	Cell Phone:	
Email:		
Alternate Email:		
Years in Current Position:	Years in Disaster/Emergency Management:	

I understand that certification is subject to OCEM Program Board approval, and if granted, is current for a three year period. I will execute the necessary documents, submit a written explanation and supply further information as determined by the Board. I understand that any false statement or misrepresentation I make in the course of these proceedings may result in the revocation of this application. I give permission for verification of any information contained in this application.

Applicant's Signature: _____ (Date)

OCEM Content Checklist:

- Work and Professional Experience
- Education and Training Requirements
- Contributions to the Field
- Application Fee made payable to: "Emergency Management Association of Ohio"

Work Experience:

Applicant must meet at least one of the qualifications outlined below by September 1st of the application year:

1. Three (3) years full-time emergency management experience in the State of Ohio;
2. Three (3) years part-time and an average of 15 hours per week in the emergency management field in the State of Ohio;
3. Two (2) years full-time emergency management experience in the State of Ohio and an Associate Degree from an accredited university or college;
4. One (1) year full-time emergency management experience in the State of Ohio and Bachelors Degree from an accredited university or college;
5. One (1) year full-time emergency management experience in the State of Ohio and an Associate Degree or higher in Emergency Management from an accredited university or college.

Work Experience

Circle "Yes" or "No" to indicate whether these items are attached

Period Covered	Jurisdiction/Company/ Organization	Title	Position Description		Supervisor	
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No

Education and Training Requirements

Applicant must meet at least one of the qualifications outlined below:

1. High School Diploma or GED and 30 CEUs or 300 contact/classroom hours training in emergency management subjects;
2. Associate Degree in any field and 10 CEUs or 100 contact/classroom hours training in emergency management subjects;
3. Bachelors Degree or higher in any field and 5 CEUs or 50 contact/classroom hours training in emergency management subjects;
4. Associate Degree or higher in Emergency Management or related field.

Education Requirements		
Institution(s)/ City, State	Dates	Degrees

*** Verification by copy of your diploma or an official college transcript must be attached.*

Training Requirements				
	Title of Training Course	Total Hours	Allowable Hours	Date(s) of Training
Subject 1				
Subject 2				
Subject 3				
Subject 4				
TOTALS:				

*** Insert Training Submission Forms in the order they are reported on this form, with documentation behind each submission as they are presented.*

- REPRODUCE THIS FORM AS OFTEN AS NECESSARY-

Training Submission Form

1. Training title and number (number where applicable):
2. Training source:
3. Training date:
4. Training length (in hours):
5. Course description (copy of syllabus or curriculum is acceptable).

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References

Each candidate must submit three reference letters, and compile the information on their references sources as requested below.

The first reference must be your current supervisor. This will be the person responsible for initiating your annual performance or job evaluation or rating.

Other reference sources who qualify:

- A past supervisor (within 7 years)
- Local, state or federal government officials or department heads
- Emergency service organization officials
- Local, regional or national disaster/ emergency management association officials
- Others (by request to and approval of OCEM Board)

Reference sources who do not qualify:

- A subordinate
- A former student
- Friends, relatives, or neighbors

Reference #1 (current supervisor)	
Name/Title	
Organization	
Address	
City, State, Zip	
Phone/ Fax/ Email	
After hours contact phone/ email	
Reference #2	
Name/Title	
Organization	
Address	
City, State, Zip	
Phone/ Fax/ Email	
After hours contact phone/ email	

Reference #3	
Name/Title	
Organization	
Address	
City, State, Zip	
Phone/ Fax/ Email	
After hours contact phone/ email	

Written Product

Applicant must submit a written product consisting of one of the following:

- An essay describing their interpretation of the role of emergency management disaster situations. The essay must be typewritten and a minimum of 500 words and maximum of 1500 words in length.
- An essay describing emergency management response to a disaster scenario that will be provided.
- A training or lesson plan for sixteen (16) hour course on one or more of the four phases of emergency management. The lesson plan may be for classroom delivery or self study and must include visual aids and a method of evaluation.

Contributions to the Field

Applicant must demonstrate at least one contribution to the field through professional membership in an emergency management relation organization, teaching, published professional articles, etc. Documentation such as a membership card or copy of roster/directory page may be provided.

Organization:
Membership Years:
Organization official who can verify membership (list name and telephone number):