

Illinois Professional Emergency Manager Standards & Accreditation Program Application

NEW APPLICANT

Revised 4/15/2025

	A	pplicant Information		
Name (As it will appear or	certificate):	Agency/Organiza	ation:	
A ddross.				
Address:		E-mail:	_	
City:	State: Zip Code	: Work Phone:	Years in Emergency M	anagement Field:
		aining Requirements		
Jse the checklist below t	o ensure all coursework has beer	completed and the appropria	te certificates have been submitt	ed to IEMA.
Illinois PDS Certificate	<u>,</u>			
Training: 90 hours o	of Emergency Management tra	ining (considered specific to	o the profession) & General Ma	anagement
_	nat can be applied beyond em	•	7 and procession, a content in	
rraining (content to	iat can be applied beyond em	ergency management).		
No more than 25% o	of hours can be spent on a sing	le topic. No more than 45 h	nours should come from Genera	al Management
Must be sempleted	within 2 years			
Must be completed	within 3 years.			
	_			
-	Ex	ercise Requirements		
Event Name:		Date:	Location:	
Select Position:		Event Type	∂:	

Please click below to view the specific narrative, documentation and verification letter requirements for each position. As you complete this part of the IPEM application, remember that the narrative, documentation and verification letter are three separate elements. If you are a member of the Inject Writing/MSEL Team, you cannot be a participant of the exercise.

Specific Position Requirements

Exercise Narrative

The narrative is specific to each of the four positions. It should include a detailed description of your activities based on your position. Although you will be asked for specific information, you need to pay special attention to two items. These include providing enough information to allow the IPEM Application Review Committee to have a thorough understanding of your involvement and identifying the lessons learned that you will take forward. When completed, this narrative should provide a baseline that not only documents where you stand today, but also help identify how you can improved your capacity to be a more productive member when developing, controlling and evaluating future exercises or managing future real-world/pre-planned events. There is no minimum length. The narrative should be a double-spaced, single-sided Word document that is to be included with your IPEM application.

Exercise Documentation	
The listed documents are specific to each of the four positions. Attach as many of the documents are not available, why they are not available and if you	
<u>Verification Letter</u>	
A letter verifying the applicant's role in the exercise.	
Professional Contributi	ons Requirement
New applicants must complete only five of the 19 listed contributions. Please	check the five contributions that are being submitted.
Professional Membership Professional Development Off	icer/Leadership Role Teaching/Instructing
Publication Award/Special Recognition Mit	gation Activity Special Assignment
Speaking Engagements Training Dis	aster Experience Mentoring (internal)
Mentoring (external) Shadowing Hig	her Education Degree Audiovisual/Interactive Product
Development of a Real-World or Pre- Planned Event Related Plan/Annex Development of Pre- Annex	Event Related Plan/ Other Contribution
Reference Letter and Expe	rience Requirements
Submit a letter validating the documented role and number of years in the	•
Acceptable sources of the letter include: current or past supervisor (with Dfficials (Municipal, County, State or Federal) and Chief Elected Official (Applicant may petition the IPEM Application Review Committee for roles not	l in your jurisdiction.
Please check the box that represents the applicant's level of experience.	
Three years Emergency Management Role at the Municipal, County, one year must be Illinois based.	State or Federal level (full, part-time or volunteer). At least
Two years Emergency Management Role, with a Bachelor's Degre Municipal, County, State or Federal level (full, part-time or volunteer	
Five years Public Safety Role in Law Enforcement, Fire, EMS, Public Non-Governmental Organization. At least one year must be Illin	
Five years Private Sector Role in Risk Management, Safety, Emergency Response Specialist, Security Coordinator, Access Control Coordinator	
Completed applications shall be submitted to the IEMA director, post marked that particular year. The current IPEM Application Review Committee mee Dates" link. To ensure that there is adequate time for the committee to revicessible.	ting schedule is listed under the "Review Committee Meeting
I agree with the information included in this form.	Mail Completed Applications to:
	IEMA Director 2200 South Dirksen Parkway
Signature of Applicant	Springfield, IL 62703-4528
Signature of Applicant	Attn: IPEM Application Review Committee

Springfield, IL 62703-4528 Attn: IPEM Application Review Committee