



## 2025 Certification Examination Application

Salutation: \_\_\_\_\_ Name: \_\_\_\_\_ Member ID: \_\_\_\_\_  
(As you would like your name to appear) (If you are an existing member or have previously applied)

Title: \_\_\_\_\_ Organization: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Preferred Mailing Address** (If different from above): \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Alt. Tel (Home/Work/Cell): \_\_\_\_\_ Alt. Email: \_\_\_\_\_

Have you previously applied for this certification examination? ☐ N ☐ Y \_\_\_\_\_ (Year applied)

Please indicate which examination you wish to write: ☐ CRTWC ☐ CDMP

Please indicate location of examination: \_\_\_\_\_

### **WDA Grant Application** (available to BC Residents only)

I have applied for funding and submitted the complete application including pages 1 and 3 directly to [nidmar@nidmar.ca](mailto:nidmar@nidmar.ca) ☐ Y ☐ N

### **Transcripts**

I have requested transcript(s) from the following institution(s) to be submitted directly to NIDMAR

1. \_\_\_\_\_
2. \_\_\_\_\_

### **Membership in Canadian Society of Professionals in Disability Management (CSPDM)**

This Application is also your application to become a member of the Canadian Society of Professionals in Disability Management ([CSPDM](#)) at no additional cost, should you successfully complete your certification examination.

Please check the following if applicable:

- ☐ You wish to become a member of the CSPDM.
- ☐ You wish to have your name published in any professional register.

### **Statement of Understanding**

I hereby guarantee that the information submitted for this certification application accurately documents my education and employment experience.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Submission addresses and instructions noted at the bottom of the checklist on page 2

## Certification Examination Application Checklist

### WDA Grant Application – for BC Residents only

Is to be submitted separately to [nidmar@nidmar.ca](mailto:nidmar@nidmar.ca) and must include both pages 1 and 3.

### Did you remember to include everything?

Before submitting your application, please ensure the following requirements have been fulfilled, as only fully completed applications will be reviewed by the Certification Council.

1. **Certification Examination Application** Completed in full, to be submitted online.
2. **Funding Application – Is not to be included in your certification application, this is to be sent separately to [nidmar@nidmar.ca](mailto:nidmar@nidmar.ca)**

### 2. Education Information

Education Summary- to be filled out online

Verification of education must be included. Official academic transcripts and course certificates must be uploaded

(A transcript will be considered official only if it bears the seal of the institution and the signature of the registrar.) **\*See note below**

### 3. Employment Information

Provide letter(s) of attestation, on the employer's letterhead, signed by your job manager(s)/supervisor(s) verifying employment criteria.

### 4. Application Fee

Please remit the **non-refundable** application fee of \$150.00 - to be processed online

### 5. Policy and Procedures

Before submitting your application, please review the Policies and Procedures

- [CRTWC Policies and Procedures](#)
- [CDMP Policies and Procedures](#)

### 6. CSPDM, Membership and Professional Registry approval

Please ensure that the documentation required is sent to the designated addresses provided.

- **Grant Applications** and any grant inquiries must be submitted to [nidmar@nidmar.ca](mailto:nidmar@nidmar.ca)
- **Exam Application** packages must be submitted through the [Certification NIDMAR](#) site

**PLEASE DO NOT email your application package in, Applications will ONLY be accepted through the Certification NIDMAR site**

**\*NOTE Original unopened transcripts** must be submitted to:

Canadian Certification Council c/o NIDMAR 4755 Cherry Creek Road, Port Alberni, BC V9Y 0A7.

Or can be emailed to [certification@nidmar.ca](mailto:certification@nidmar.ca) directly from educational institution of issue.