

American Jail Association
Jail Manager Certification Commission

CJM RECERTIFICATION APPLICATION

MAINTAINING CERTIFICATION

Certification lasts for a period of four years. It is essential for Certified Jail Managers to engage in continual professional development activities to cope with rapidly changing conditions. *Please see "Eligibility" section if you no longer meet the definition of a jail manager.*

You have two options to apply for recertification:

Option 1 Professional Points Accumulation

- Mark the appropriate box at the top of the *CJM Recertification Application Form*.
- You must accumulate at least 350 professional points between your examination (or recertification) date and the date you apply for recertification. Of the 350 required points, at least **40 points must be attained by completing Management-Based Education/Training** activities. The remaining 310 professional points required for recertification can be attained by engaging in jail management related leadership activities and additional continuing education and training activities.
- Submit your completed *CJM Recertification Application* with fees to AJA Headquarters WITHIN SIX WEEKS of your fourth year certification anniversary date.*

*It is the Certified Jail Manager's responsibility to meet the recertification criteria and to complete and submit an application for recertification **POSTMARKED AT LEAST SIX WEEKS PRIOR** to his/her fourth year certification anniversary date. Recertification applications received after the six week date will be assessed an additional \$75 processing fee. If the application is postmarked after the CJM's certification expiration date, to become certified again, the individual will have to apply for certification and take the CJM examination. Any Recertification Applications received without payment will be returned. Fees are subject to change.

Fees: AJA Member: \$150 (Individual) Nonmember: \$210

OR (BUT NOT BOTH)

Option 2 Re-examination

- Mark the appropriate box at the top of the *CJM Recertification Application Form*.
- Submit page 3 of the *Application Form* with the *Current Jail Management Position* and required documentation along with fees to AJA by the deadlines listed in the Handbook for Candidates.
- Examinations will be administered electronically by LaserGrade. Visit www.lasergrade.com to find the testing site closest to you.

Fee: \$360

JAIL MANAGER CERTIFICATION COMMISSION

c/o American Jail Association, 1135 Professional Court, Hagerstown, Maryland 21740
301-790-3930 Fax: 301-790-2941 www.aja.org certification@aja.org

ELIGIBILITY

To be eligible for recertification, the CJM must be currently employed as a jail manager, or have had no more than a two year departure from such employment at the time of CJM's certification expiration date AND must state an intention to re-enter the field of jail management. The candidate must also complete at least 40 points in the Management-Based Education and Training section of the Recertification application. If at the time of application for recertification, the CJM no longer meets the definition of a jail manager, the designation may be maintained if the CJM has recertified as least once prior to the current application. The CJM must also maintain activity in the field of corrections as evidenced by completion of the recertification application requirements.

Certified Jail Managers who do not apply for recertification and/or who fail to meet the criteria required for recertification by their certification expiration date (four years from previous certification date) will be notified in writing by the Jail Manager Certification Commission of suspension of using the CJM designation and will no longer be listed as a CJM by the Commission or in any AJA publication. If certification is suspended, and at some point in the future the former CJM decides to become certified again, he/she will be required to proceed through the entire certification process, including taking the certification examination.

REVOCAION OF CERTIFICATION

Certification may be revoked or denied for any of the following reasons:

1. Falsification of an application and/or EBF,
2. Misrepresentation of certification,
3. Breach of existing ethical standards of professional practice.

An appeals mechanism for challenging revocation or denial of certification is available.

*The JMCC reserves the right to enact changes in the recertification requirements at any time.
It is the responsibility of the Candidate to obtain the most current Recertification Application.*

CERTIFIED JAIL MANAGER PROGRAM DEFINITIONS

For the purposes of the Certified Jail Manager Program:

DEFINITION OF A JAIL MANAGER

A person (sworn or civilian) who directs, administers, and/or is in charge of the operations of a jail facility, division, bureau, department, program, and/or shift; and/or a person (sworn or civilian) who supervises the work and performance of an employee or employees in a jail facility.

DEFINITION OF A JAIL

1. **A county, municipal, tribal or regional facility that houses pretrial and sentenced inmates; and/or an institution that houses pretrial and sentenced inmates where the state is responsible for jail operations (Alaska, Hawaii, Rhode Island, Connecticut, Vermont, Delaware); and/or a private facility that houses pretrial and sentenced inmates and exists to serve the local jail needs of the community where it operates.**

And/or

2. **A facility that houses ONLY pretrial detainees, regardless of what entity operates it. This includes, but is not limited to facilities that house persons for less than 72 hours (lock-ups), facilities that house Federal or military custody inmates awaiting trial (e.g. ICE, Marshals, Armed Forces), institutions where the State is responsible for the operations of jails, and private facilities.**

And/or

3. **A local government or private facility that houses convicted persons who, without this regard to private facilities: the local government responsible for jail operations has contracted with a separate entity to replace that jurisdiction's jail operations.**

Non-Discrimination Policy: The American Jail Association, Inc., through its administration of the Certified Jail Manager program, conforms in all respects to Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendment of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and the Americans with Disabilities Act of 1990; does not discriminate against any person on the basis of race, color, religion, national origin, sex, age, disability or sexual orientation in any of its policies, procedures, or practices.

CJM RECERTIFICATION APPLICATION FORM

PLEASE CHECK ONE

I choose to recertify by: Application/Professional Point System Re-Examination

TYPE OR PRINT CLEARLY

Date: _____

Name _____ AJA Membership #: _____

RETIRED

Title _____

Agency _____

Agency Address _____

City _____ State _____ ZIP _____ - _____

Office Telephone Number (_____) _____ Fax (_____) _____

E-mail _____

Date of First Certification: ____/____/____ Rated Capacity of Facility: _____

Date of Last Recertification (if applicable): ____/____/____

.....
***ALL CORRESPONDENCE
WILL BE SENT TO YOUR HOME ADDRESS***

Current Home Address _____

City _____ State _____ ZIP _____ - _____

Home Phone () _____ E-mail _____

Required Documentation:

***AN OFFICIAL AGENCY POSITION DESCRIPTION FOR ALL POSITIONS
LISTED MUST ACCOMPANY THIS APPLICATION***

Organization charts are also requested but not required

CURRENT JAIL MANAGEMENT POSITION

To be eligible for recertification, the Candidate must be currently employed as a jail manager, or have had no more than a two year departure from such employment at the time of the CJM's certification expiration date **AND** must state an intention to re-enter the field of jail management.

Required Documentation:

***AN OFFICIAL AGENCY POSITION DESCRIPTION
MUST ACCOMPANY THIS APPLICATION***

LIST YOUR CURRENT, OR MOST RECENT, JAIL MANAGEMENT POSITION:

Position must meet the requirements set forth in the definition of a Jail Manager.

Candidate: _____

Current Employing Agency: _____

Agency Address: _____

Current Position: _____

Rank (if applicable): _____ Dates: From: ____/____/____ To ____/____/____

Please indicate what facility, division, bureau, department, program, and/or shift you direct in your current position: _____

Please indicate how many jail staff you supervise: _____

Please check the paragraph below that describes your current agency. (Agency must meet the CJM program's definition of a jail.)

- A county, municipal, tribal or regional facility that houses pretrial and sentenced inmates; and/or an institution that houses pretrial and sentenced inmates where the State is responsible for jail operations (Alaska, Hawaii, Rhode Island, Connecticut, Vermont, Delaware); and/or a private facility that houses pretrial and sentenced inmates and exists to serve the local jail needs of the community where it operates.
- A facility that houses ONLY pretrial detainees, regardless of what entity operates it. This includes, but is not limited to facilities that house persons for less than 72 hours (lock-ups), facilities that house Federal or military custody inmates awaiting trial (e.g. ICE, Marshals, Armed Forces), institutions where the State is responsible for the operations of jails, and private facilities.
- A local government or private facility that houses convicted persons who, without this facility's existence, would serve their sentence in the local jurisdiction's jail. With regard to private facilities: the local government responsible for jail operations has contracted with a separate entity to replace that jurisdiction's jail operations.
- Other: (Describe) _____

"Continued"

**CURRENT JAIL MANAGEMENT
PAID POSITION**
(Continued)

The following statement must be signed by the chief executive officer (sheriff, chief deputy, detention director, jail administrator, etc.) If the candidate/applicant is the chief executive officer, please sign your name below.

The information provided in the *Current Jail Management Paid Position* section of this CJM Application & Experiential Background Form (EBF) for candidate: _____ regarding his/her current position with _____ is, to the best of my knowledge, truthful and accurate.

Chief Executive Officer's Signature

Title

Date

Chief Executive Officer's Printed Name

Required Documentation:

***AN OFFICIAL AGENCY POSITION DESCRIPTION
MUST ACCOMPANY THIS APPLICATION***

Organization charts are also requested but not required



Stop here and turn to the **CJM Test Question Submission** page (item #14) if you have chosen to Recertify By Examination! **You are still required to submit at least three questions for future exams.**

PREVIOUS JAIL MANAGEMENT POSITION

Previous Jail Management Paid Experience: List any previous positions held within the last four years. To be eligible for recertification, the Candidate must be currently employed as a jail manager, or have had no more than a two year departure from such employment at the time of the CJM's certification expiration date **AND** must state an intention to re-enter the field of jail management.

Required Documentation:

***AN OFFICIAL AGENCY POSITION DESCRIPTION
MUST ACCOMPANY THIS APPLICATION***

Candidate: _____

Agency: _____

Address: _____

Previous Position: _____

Rank (if applicable): _____ Dates: From: ____/____/____ To ____/____/____

Please indicate what facility, division, bureau, department, program, and/or shift you directed in this position: _____

How many jail staff you supervised: _____

Please check the paragraph below that describes your previous agency. (Agency must meet the CJM program's definition of a jail.)

- A county, municipal, tribal or regional facility that houses pretrial and sentenced inmates; and/or an institution that houses pretrial and sentenced inmates where the State is responsible for jail operations (Alaska, Hawaii, Rhode Island, Connecticut, Vermont, Delaware); and/or a private facility that houses pretrial and sentenced inmates and exists to serve the local jail needs of the community where it operates.
- A facility that houses ONLY pretrial detainees, regardless of what entity operates it. This includes, but is not limited to facilities that house persons for less than 72 hours (lock-ups), facilities that house Federal or military custody inmates awaiting trial (e.g. ICE, Marshals, Armed Forces), institutions where the State is responsible for the operations of jails, and private facilities.
- A local government or private facility that houses convicted persons who, without this facility's existence, would serve their sentence in the local jurisdiction's jail. With regard to private facilities: the local government responsible for jail operations has contracted with a separate entity to replace that jurisdiction's jail operations.
- Other: (Describe) _____

PROMOTIONS

since last date of certification: ____ / ____ / ____

- 1. Promotions:** List any promotions you have received since your initial certification date, or your last recertification date. A copy of your official notification of promotion must accompany this application to be awarded points. Ten (10) points will be awarded for each promotion. Should a promotion of several ranks occur on one date, only 10 points will be awarded.

Required Documentation:

***A COPY OF YOUR OFFICIAL NOTIFICATION OF PROMOTION
MUST ACCOMPANY THIS APPLICATION
TO BE AWARDED CREDIT***

Candidate: _____

Agency: _____

Promotion in rank: To: _____ From: _____

Date of Promotion: ____ / ____ / ____

_____ *Points for this promotion*

[] *Required Documentation is attached*

Agency: _____

Promotion in rank: To: _____ From: _____

Date of Promotion: ____ / ____ / ____

_____ *Points for this promotion*

[] *Required Documentation is attached*

EDUCATION AND TRAINING

Higher Education attained since last date of certification

2. Higher education attained at *accredited, degree-granting* institutions only. To receive points, the name of the college or university must be given below. Points are awarded only for the highest level of education attained since your last certification date. Points are not cumulative.

Required Documentation:

**APPLICANTS MUST SUBMIT AN
OFFICIAL ORIGINAL TRANSCRIPT TO RECEIVE POINTS**

How points are awarded: If a Candidate received points for higher education on his/her original EBF, or previous Recertification Application, and completed a higher degree since that time, the Candidate will be awarded the point difference between the degrees. For example: If a Candidate previously received points for an associate's degree and has since earned a bachelor's degree, the candidate will be awarded 50 points on the *Recertification Application*, the difference between an associate's degree (50 points) and a bachelor's degree (100 points.)

Indicate highest degree attained since the last date of certification. Subtract the points previously awarded on your original EBF, or last recertification. Indicate the point difference in right hand column.

Degree attained in the last four years – points awarded on last Certification = points towards this recertification

<u>Current Degree</u>	Subtract (-)	<u>Previous Degree</u>	=	_____
		<small>(Points submitted on previous Recert or EBF)</small>		<small>Points Earned</small>
___ Associate's Degree = 50 pts		___ Associate's Degree = 50 pts		
___ Bachelor's Degree = 100 pts		___ Bachelor's Degree = 100 pts		
___ Master's Degree = 125 pts		___ Master's Degree = 125 pts		
___ Doctorate Degree = 150 pts		___ Doctorate Degree = 150 pts		
		___ No Degree		

Institution's Name: _____

Address/City/State: _____

Phone Number of Institution: _____

Major(s): _____

If work toward a bachelor's degree resulted in the accumulation of credit hours equal to that of an associate's degree (64 credits), but no degree has been attained, state number of credit hours completed _____. You will receive 50 points for associate's degree equivalent.

MANAGEMENT-BASED EDUCATION / TRAINING

since last date of certification: ____ / ____ / ____

DO NOT INCLUDE college courses where credits were earned toward a degree.

3. **Jail management, criminal justice management, and general management education/training:** education, training programs, conferences, etc., attended on subject matter(s) related specifically to *jail management, criminal justice management, and general management*. To be awarded points, the subject matter must be management related. **DO NOT INCLUDE** basic practical training such as CPR, firearms, computer training, defensive tactics, etc. *National Jail Leadership Command Academy (NJLCA) completion = 80 Points.*

Provide complete dates. If only one date is provided, only one day of credit will be awarded.

To be Eligible for Recertification, At least 40 Points must be attained by completing Management-Based Education Activities

Points will not be awarded for any activities in this Section until this criterion has been met.

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____ / ____ / ____ To: ____ / ____ / ____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

_____ *Total points for this management-based education / training*

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____ / ____ / ____ To: ____ / ____ / ____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

_____ *Total points for this management-based education / training*

Note: If the JMCC is unable to determine whether or not an education/training activity is management based, no points will be awarded for the entry. Supporting documentation such as a course description, agenda, etc., is recommended for circumstances where this may be unclear.

MANAGEMENT-BASED EDUCATION / TRAINING

(continued)

since last date of certification: ____ / ____ / ____

Provide complete dates. If only one date is provided, only one day of credit will be awarded.

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____ / ____ / ____ To: ____ / ____ / ____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

_____ *Total points for this management-based education / training*

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____ / ____ / ____ To: ____ / ____ / ____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

_____ *Total points for this management-based education / training*

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____ / ____ / ____ To: ____ / ____ / ____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

_____ *Total points for this management-based education / training*

(Make extra copies of any form if necessary)

DISTANCE LEARNING

since last date of certification: ____ / ____ / ____

Maximum allowable for Distance Learning: 120 points

4. **Management-based courses taken online or by correspondence where the subject matter is relevant to your position as a jail manager.** One point per hour of instruction will be awarded for management-based courses offered by the **National Institute of Corrections (NIC)** and the **American Correctional Association (ACA)**. Other management-based distance coursework will be evaluated on a case-by-case basis.

DO NOT INCLUDE courses related to basic correctional practice such as those written for front-line officers.

One point will be awarded per hour of management-based training.

Required Documentation: To be awarded points, the following information must be included.

- 1. Course description outlining the learning objectives and course hours**
- 2. Documentation of successful completion of the course of study**

Title of course: _____

Type of course: Online Correspondence

Agency providing training: NIC ACA Other: _____

Date of completion: _____/_____/_____ Course hours: _____ x 1 = _____

_____ *Total points for this management-based online course*

Course description, number of training hours, and certificate of completion attached

Title of course: _____

Type of course: Online Correspondence

Agency providing training: NIC ACA Other: _____

Date of completion: _____/_____/_____ Course hours: _____ x 1 = _____

_____ *Total points for this management-based online course*

Course description, number of training hours, and certificate of completion attached.

INDEPENDENT STUDY

AJA'S JAIL MANAGERS BULLETIN (JMB) VOLUME

since last date of certification: ____ / ____ / ____

5. **Jail Managers Bulletin** independent study: 10 points per volume will be awarded for the study of complete volumes of AJA's Jail Managers Bulletins. Candidate must complete the entire volume of study and provide verification of study from the training department or facility administrator.

10 points per completed volume of study (A volume consists of 12 bulletins)

Required Documentation:

The name, title, phone number, and signature of the individual verifying the JMB independent study **MUST** be provided.

Please indicate the volume number of the Jail Managers Bulletins that you studied:

JMB Volume #: _____ Date of completion: ____ / ____ / ____

Name of agency representative verifying completion: _____

Title: _____ Phone Number: _____

Signature: _____

_____ *Total points for this independent study*

Please indicate the volume number of the Jail Managers Bulletins that you studied:

JMB Volume #: _____ Date of completion: ____ / ____ / ____

Name of agency representative verifying completion: _____

Title: _____ Phone Number: _____

Signature: _____

_____ *Total points for this independent study*

(Make extra copies of any form if necessary)

MENTORSHIP

Maximum allowable for Mentorship: 40 points

A Certified Jail Manager may apply for recertification points by serving as a mentor for an individual interested in becoming a Certified Jail Manager.

To Qualify:

A CJM must mentor an individual by making them aware of the Certified Jail Manager Program; educating them about the application process; assisting them with the completion of the Experiential Background Form; providing support in preparation for the certification exam; and providing advice in reference to activities that will further their career and aid in Recertification.

A Certified Jail Manager will receive 20 points for recertification for each individual that makes application as a CJM and actually takes the CJM examination. The CJM applicant must indicate they are being mentored on their Experiential Background Form.

Applicant Mentored: _____

Agency: _____

CJM Application Date: _____

CJM Examination Date: _____

Applicant Mentored: _____

Agency: _____

CJM Application Date: _____

CJM Examination Date: _____

_____ Points Awarded for this Section.

LEADERSHIP ACTIVITIES

JAIL MANAGEMENT / CRIMINAL JUSTICE VOLUNTEER LEADERSHIP POSITIONS HELD OUTSIDE OF YOUR EMPLOYING AGENCY

since last date of certification: ____ / ____ / ____

6. Volunteer LEADERSHIP positions held on jail management / criminal justice oriented boards, committees, task forces, and commissions OUTSIDE of your employing agency. Points awarded for completed years only. If a committee or task force assignment has a duration of less than one year, but more than 3 months, it qualifies for one year of service.

Board / Commission: A Board/Commission is a policy setting body.

Committee / Task Force: A Committee or Task Force is assigned a task from another body.

Organization: _____

Office or position held: _____

Name of Board/ Commission / Committee/ Task Force: _____

Goals and purposes of the Board/Commission/Committee/Task Force listed: _____

Dates of Service: From: ____ / ____ / ____ To: ____ / ____ / ____

of years ____ Board/Commission Officer: x 25 points = ____

of years ____ Board/Commission Member: x 20 points = ____

of years ____ Committee Chair/Task Force Leader x 15 points = ____

of years ____ Committee Member/Task Force Member x 10 points = ____

_____ Total points for this jail management/criminal justice leadership activity

Organization: _____

Office or position held: _____

Name of Board/ Commission / Committee/ Task Force: _____

Goals and purposes of the Board/Commission/Committee/Task Force listed: _____

Dates of Service: From: ____ / ____ / ____ To: ____ / ____ / ____

of years ____ Board/Commission Officer: x 25 points = ____

of years ____ Board/Commission Member: x 20 points = ____

of years ____ Committee Chair/Task Force Leader x 15 points = ____

of years ____ Committee Member/Task Force Member x 10 points = ____

_____ Total points for this jail management/criminal justice leadership activity

SCHEDULED SPEAKER OR INSTRUCTOR

since last date of certification: ____ / ____ / ____

7. **Scheduled Speaker or Instructor** for the purpose of teaching subjects specifically related to *jail management* issues to corrections personnel, governmental officials, or criminal justice students.

A MAXIMUM of 72 points will be awarded for each course taught on jail/correctional management topics.

DO NOT INCLUDE presentations made to the staff of your employing organization or practical training such as *CPR, firearms, defensive tactics*, etc., or courses relating to basic correctional practice, such as those written for front-line officers.

Organization conducting event: _____

Jail management related subject discussed: _____

Audience in attendance: _____

Location of event: _____

Dates of service: From: ____ / ____ / ____ To: ____ / ____ / ____

of hours _____ x 3 points = _____

_____ *Total points for this **jail management** related speech/instruction (Maximum: 72 points)*

Organization conducting event: _____

Jail management related subject discussed: _____

Audience in attendance: _____

Location of event: _____

Dates of service: From: ____ / ____ / ____ To: ____ / ____ / ____

of hours _____ x 3 points = _____

_____ *Total points for this **jail management** related speech/instruction (Maximum: 72 points)*

(Make extra copies of this form if necessary)

TECHNICAL ASSISTANCE CONSULTANT

since last date of certification: ____ / ____ / ____

8. Participation as a *technical assistance* consultant in an advisory (paying or nonpaying) capacity on jail operations/management issues (other than your employing agency), participation in CJM item review sessions, or as a *jail auditor* OUTSIDE of your employing agency.

Agency that contracted your services: _____

Agency address: _____

Agency phone: _____

Date(s) of service: From: ____ / ____ / ____ To: ____ / ____ / ____

Nature of service performed: _____

Contact Person: _____ Phone: _____

of full days ____ x 8 pts = ____ # of half days ____ x 4 pts = ____

_____ *Total points for this jail management related activity*

Agency that contracted your services: _____

Agency address: _____

Agency phone: _____

Date(s) of service: From: ____ / ____ / ____ To: ____ / ____ / ____

Nature of service performed: _____

Contact Person: _____ Phone: _____

of full days ____ x 8 pts = ____ # of half days ____ x 4 pts = ____

_____ *Total points for this jail management related activity*

WORK PUBLISHED OUTSIDE OF YOUR EMPLOYING AGENCY

since last date of certification: ____ / ____ / ____

- 9. Articles, bulletins, chapters, books,** written and published on jail management /criminal justice related subjects (excluding your employing agency's publications). Include articles published in AJA's magazine, *AMERICAN JAILS*, and other similar publications. To be eligible for points, the article must be management-based and relevant to the role of the jail manager, and a copy must accompany your application.

Required Documentation:

A copy of the work written and published must accompany your application to be awarded points.

Title of the jail management / criminal justice related work written and published:

Name of the publication (journal, book, magazine, etc.)_____

Name of publisher (organization/agency):_____

Date of publication: ____/____/____

Check one:

- Book**, Jail Management or Criminal Justice based = 50 pts
- Chapter** in a Jail Management or Criminal Justice Book = 25 pts
- Magazine Article/Bulletin**, Jail Management or Criminal Justice based = 20 pts

_____ *Total points for this published work*

Required documentation is attached to this sheet

(Make extra copies of this form if necessary)

NATIONAL CERTIFICATIONS

since last date of certification: ____ / ____ / ____

- 10. National certifications obtained related to jail management, criminal justice management, and public management.** Points will be allowed for certifications obtained where the emphasis of the certification relates specifically to jail management, criminal justice management, or public management.

Required Documentation:

A copy of the official notification of certification, on the sponsoring organization's letterhead, MUST accompany the EBF.

Points for certifications will be allowed for:

CCS	Certified Correctional Supervisor, ACA: 5 points
CCM	Certified Correctional Manager, ACA: 10 points
CCE	Certified Correctional Executive, ACA: 15 points
CPM	Certified Public Manager, CPM: 20 points
CCHP	Certified Correctional Health Professional, NCCHC: 10 points
CFP	Certified Correctional Food Service Professional, ACFSA: 10 points
CCT	Certified Correctional Trainer, AJA/IACTP: 5 points

Other *national* certifications obtained related to jail management, criminal justice management, and public management will be evaluated on a case-by-case basis. In order for the JMCC to evaluate other national certifications detailed information regarding the eligibility requirements for the certification must accompany this application. Certification should be sponsored by a *national organization*. DO NOT include basic jail/corrections certifications.

Certification: _____

Organization sponsoring certification: _____

Address of sponsoring organization: _____

Phone number of sponsoring organization: _____

Date of Certification: ____ / ____ / ____ Date of Expiration: ____ / ____ / ____

_____ *Total points for this certification*

[] *Required Documentation Attached*

AWARDS

since last date of certification: ____ / ____ / ____

- 11. Awards presented** to you by a national, state/regional, or community organization as a result of some action or activity performed by you during the course of your service as a paid jail manager.

DO NOT INCLUDE listings such as Who's Who, certificates of appreciation, letters of commendation or awards from your employing agency.

Required Documentation:

To facilitate the evaluation of your award, enclose a copy of the letter/announcement sent to you acknowledging your accomplishment and the reason you were being awarded.

Name/type of award _____

Name of organization/agency presenting award: _____

Address of organization/agency: _____

Brief description of why you were presented this award: _____

Date award was presented: ____ / ____ / ____

This award was presented by: (check only one)

National Organization/Agency = 20 pts

State or Regional Organization/Agency = 15 pts

Community Organization/Agency = 10 pts

_____ Total points for this award

Required Documentation Attached to this sheet

COMMUNITY-BASED VOLUNTEER LEADERSHIP ROLES

since last date of certification: ____ / ____ / ____

Maximum allowable: 40 points

- 12. Community-based Volunteer Leadership Service** roles performed in the community outside of your role as a paid jail manager. Eligible listings would include participation in a leadership capacity (non-paid) in business, professional, technical, community service organizations, management organizations, and other community-service oriented organizations including roles related to advisory or other service on government agencies, boards, commissions and involvement in the political process.

To be awarded points, a detailed description of the purpose of the organization and your specific leadership role in organization must be provided. *Do not duplicate information given elsewhere.* Points are awarded for *completed* years only.

Organization: _____

Mission (purpose) of the Organization: _____

Organization's Address: _____

Contact person & phone number: _____

Leadership role performed: (i.e. spokesperson, chairperson etc.): _____

Describe in detail the nature of the leadership service you performed:

Dates of service: From: ____ / ____ / ____ To: ____ / ____ / ____

of years _____ x 10 points = _____ (*Points will be awarded for completed years only.*)

_____ *Total points for this volunteer leadership service*
(Reminder: maximum total for this item is 40 points)

MEMBERSHIPS

Maximum allowable for Memberships: 40 points

since last date of certification: ____ / ____ / ____

- 13. Membership in state, regional, or national jail/corrections associations** - such as the, American Jail Association, American Correctional Association, National Sheriffs' Association, Bay Area Jail Managers Association, South Carolina Jail Administrators' Association, etc.

Do not list law enforcement associations (such as FOP, NABCJ, etc.) or local county/agency labor oriented associations/organizations. Provide complete dates. You will be awarded **5 points per year** of membership. Points awarded for FULL years only.

Name of Association: _____

Address of Association: _____

Dates of Membership: From: ____ / ____ / ____ To: ____ / ____ / ____

Please indicate the type of **JAIL** or **CORRECTIONS** Association:

State Association Regional Association National Association

_____ years x 5 pt = _____ points

_____ *Total points for membership in this jail/corrections related association*

Name of Association: _____

Address of Association: _____

Dates of Membership: From: ____ / ____ / ____ To: ____ / ____ / ____

Please indicate the type of **JAIL** or **CORRECTIONS** Association:

State Association Regional Association National Association

_____ years x 5 pt = _____ points

_____ *Total points for membership in this jail/corrections related association*

(Make copies of any form if necessary)

CJM TEST QUESTION SUBMISSIONS

since last date of certification: ____ / ____ / ____

Please note this is a Recertification requirement:

Any recertification application must include a minimum of three original potential test questions for the Certified Jail Manager examination.

14. A maximum of 20 points will be allowed on the Recertification Application for potential test questions submitted for the Jail Manager Certification examination.

Potential test questions must:

- be applicable to *adult* local corrections in general, and
- not be state or jurisdictional specific,
- be management-based,
- not include “all of the above” or “none of the above” as an answer,
- not be “not” questions (example: Which of the following is not . . .)
- not be taken from the ACA Standards Manual,
- be submitted on the ***Item Submission Sheet*** enclosed in this application -
(one question per form), please make additional copies of the form as necessary.
- **a copy of the reference must be submitted with the application.**

Major Content Areas for Questions on the CJM Examination

- I. Environment/Equipment/Technology
- II. Legal/Safety/Security
- III. Professional Issues
- IV. Communications
- V. Management
- VI. Special Populations
- VII. Support Services

Submissions:

Date questions were submitted to the JMCC: ____/____/____

of questions ____ x 2 points = _____

_____ *Total points for this submission*

ITEM SUBMISSION SHEET

Please state your question in multiple choice format and provide ONE CORRECT answer and THREE plausible but INCORRECT options. Please do not use “all of the above” or “none of the above” options. You may also create a situation which has more than one question accompanying it.

If your question includes a diagram or illustration, please clip it to the reverse side. It must be camera-ready, not a “copy of a copy,” and it must not be copyright protected.

A copy of the reference must be submitted with the application.

Please refer to the enclosed *Item Developers Guide* (or print a copy from the AJA website, www.aja.org) for assistance in writing test items. Please make additional copies of this form as necessary.

QUESTION:

1. CORRECT ANSWER

2. INCORRECT OPTION

3. INCORRECT OPTION

4. INCORRECT OPTION

For which test is the question submitted? **JAIL MANAGER CERTIFICATION EXAM**

Reference your question (**a copy must be attached**): _____

Major Content Area (see enclosed list): _____

Your Name: _____

(Make extra copies of any form if necessary)

RECERTIFICATION SUMMARY OF POINTS

**Applicants must
attain 350 points
for recertification**

TOTAL POINTS: _____

Before you put your Application for Recertification and supporting documents in the mail, be sure to make a copy of them for your files. You may need to refer to them should the Commission contact you with any questions.

The JMCC will accept Recertification Applications as early as six months prior to the Candidate's certification expiration date. Candidates are encouraged to submit applications early to avoid potential problems that may occur. You will be notified of the status of your application for recertification within six weeks from the time we receive your completed application for recertification and all required supporting documentation including fees. Incomplete applications for recertification and/or applications without the required documentation and fees will be sent back to the candidate and the evaluation process will not commence until all required materials and information have been received by the JMCC.

RECERTIFICATION DEADLINES- Professional Points (only)

Applications for recertification must be *postmarked at least 6 weeks prior* to your certification expiration date. Recertification applications received after the six week due date will be assessed an additional \$75 processing fee. If the application is postmarked after the CJM's expiration date, to become certified again, the individual will have to apply for certification and take the CJM examination. Recertification applications received without payment will be returned.

I do hereby certify that my biographical statement, as submitted to the JMCC in connection with my application for recertification, is true and correct in all material respects. I authorize the JMCC to take whatever reasonable steps may be necessary to verify and confirm the accuracy of the information contained herein. If an audit is conducted, or my application is incomplete or is received without payment, or the JMCC determines that I do not have the required number of points or that I have not met other criteria required for eligibility: I understand that the delay this would create in further processing my application could result in missing the recertification application deadline.

The JMCC reserves the right to enact changes in the recertification requirements at any time.

I agree to be bound by the Code of Ethics of AJA and understand that any material misrepresentation of the information provided on the CJM Recertification Application may result in denial or loss of the CJM designation. I acknowledge that I have read and understand the CJM Handbook for Candidates.

The undersigned hereby agrees to indemnify and hold harmless the American Jail Association, Inc., its officers, directors, employees and agents from any or all liability, loss or damage whatsoever that may result from a denial of my application for recertification as a Certified Jail Manager.

Signature

Date

DO NOT E-MAIL OR FAX THIS APPLICATION!

RECERTIFICATION PAYMENT FORM

CJM RECERTIFICATION APPLICATION

DO NOT E-MAIL OR FAX DOCUMENTS

RECERTIFICATION FEES

The CJM *Recertification Application* must be submitted with the nonrefundable application fees **AND** all required supporting documentation. Fees are subject to change.

You will be notified of the status of your recertification within six weeks from the time the JMCC receives your completed application.

METHOD OF PAYMENT

Candidate name: _____

Name of Cardholder: _____

Signature of Cardholder: _____

VISA Card MasterCard American Express

Credit Card Number: _____

Expiration Date: _____

Billing Address ZIP Code: _____

Security#: _____ (Visa/MasterCard- three digit # found on the signature panel)
(American Express- four digit # found on front of card)

Amount of Payment: \$ _____ Member Fee (\$150) Nonmember Fee (\$210) **OPTION 1**

Amount of Payment: \$ _____ \$360 **OPTION 2**

Payment includes an additional late submission processing fee

Check Enclosed # _____

P.O. Form Enclosed # _____

Send payment and all required materials to:

CJM Program
c/o American Jail Association
1135 Professional Court, Hagerstown, Maryland 21740, Phone: 301-790-3930

CJM RECERTIFICATION APPLICATION CHECK LIST

Be sure to include:

- [] An official agency **Position Description** for all jail management positions listed on the application.
- [] The completion of at least **40 points** in the **Management-Based Education and Training** Section. (**Mandatory**)
- [] **CJM Examination Questions:** three Jail Manager Certification examination questions must accompany your application. (**Mandatory**)
- [] **Application fee.**
- [] **Signature** on the application.
- [] **Postmark Date:** application postmark is at least **six** weeks prior to certification expiration date (see the Recertification Deadline section of the *Handbook for Candidates*).
- [] All **Required Documentation** as noted on the appropriate page.
 - [] **Promotions** listed: A copy of the official notification.
 - [] **College Degrees** listed: An official original transcript for any college degrees attained since your last certification date.
 - [] **Distance Learning Courses** listed: 1) course description 2) certificate of completion.
 - [] **Independent JMB** study listed: Agency representative signature.
 - [] **Work Published** listed: A copy of the work authored.
 - [] **Awards** listed: Copy of the letter/announcement acknowledging your accomplishment.
 - [] **National Certifications** listed: enclose a copy of the official notification of certification on the sponsoring organization's letterhead.

AMERICAN JAIL ASSOCIATION

CODE OF ETHICS FOR JAIL OFFICERS

As an officer employed in a detention/correctional capacity, I swear (or affirm) to be a good citizen and a credit to my community, state, and nation at all times. I will abstain from questionable behavior which might bring disrepute to the agency for which I work, my family, my community, and my associates. My lifestyle will be above and beyond reproach and I will constantly strive to set an example of a professional who performs his/her duties according to the laws of our country, state, and community and the policies, procedures, written and verbal orders, and regulations of the agency for which I work.

On the job I promise to:

- KEEP** The institution secure so as to safeguard my community and the lives of the staff, inmates, and visitors on the premises.
- WORK** With each individual firmly and fairly without regard to rank, status, or condition.
- MAINTAIN** A positive demeanor when confronted with stressful situations of scorn, ridicule, danger, and/or chaos.
- REPORT** Either in writing or by word of mouth to the proper authorities those things which should be reported, and keep silent about matters which are to remain confidential according to the laws and rules of the agency and government.
- MANAGE** And supervise the inmates in an evenhanded and courteous manner.
- REFRAIN** At all times from becoming personally involved in the lives of the inmates and their families.
- TREAT** All visitors to the jail with politeness and respect and do my utmost to ensure that they observe the jail regulations.
- TAKE** Advantage of all education and training opportunities designed to assist me to become a more competent officer.
- COMMUNICATE** With people in or outside of the jail, whether by phone, written word, or word of mouth, in such a way so as not to reflect in a negative manner upon my agency.
- CONTRIBUTE** To a jail environment which will keep the inmate involved in activities designed to improve his/her attitude and character.
- SUPPORT** All activities of a professional nature through membership and participation that will continue to elevate the status of those who operate our nation's jails. Do my best through word and deed to present an image to the public at large of a jail professional, committed to progress for an improved and enlightened criminal justice system.

The American Jail Association's Board of Directors has approved the AJA Code of Ethics as part of an integral program to achieve a high standard of professional conduct among those officers employed in our Nation's jails. Adopted by the AJA Board of Directors on November 10, 1991. Revised 3/24/2009.