



Application for the Oklahoma Certified Public Manager® Program

**Unless your agency specifies otherwise, send completed/approved application to:*

Joyce Doakes Smith, CPM Coordinator
Training and Development/Office of Management and Enterprise Services
Jim Thorpe Building
2101 North Lincoln Boulevard
Oklahoma City, Oklahoma 73105
Phone: (405) 522-3617 Fax: (405) 522-1752
e-Mail: Joyce.Smith@omes.ok.gov

1.) Nominee's Section: Please initial beside the statement and fill out the information below.

____ I understand that this is a rigorous program and will require a substantial time commitment.

Signature _____ Date _____

Name (please print) _____ Employee ID Number _____

Job Title _____ Division _____

Business Phone Number () _____ Home Phone Number () _____

Agency Name _____ Agency Number _____

Agency Street Address _____

Agency Mailing Address (if different from Street Address) _____

City/State/Mailing Zip _____

e-Mail Address _____

2.) Immediate Supervisor's Section: Please initial beside the statement and sign below.

____ I approve this nomination and will allow the employee time at work to participate in the program.

Signature _____ Date _____

Name (please print) _____

3.) Appointing Authority's Section: Please initial beside the statement and sign below.

____ I understand this employee will require time to participate in the CPM program, and there is a limited financial obligation to our agency.

Signature _____ Date _____

Name (please print) _____