



Senior Professional in Supply Management (SPSM) Application for Original Certification

This application is to be completed after satisfying the original certification requirements. To register for the SPSM Certification Program, visit <https://www.NextLevelPurchasing.com/certification-programs/spsm>

Original Certification Requirements

Applicants for Original SPSM certification must pass the SPSM Exam. In addition, the applicant must have completed, with an average score of 70% or higher, each of these six online classes offered by Next Level Purchasing, Inc.:

- Mastering Purchasing Fundamentals
- Microsoft Excel For Purchasing Professionals
- Supply Management Contract Writing
- Powerful Negotiation For Successful Buying
- 14 Purchasing Best Practices
- Savings Strategy Development

Note: Applications must be completed, and all documentation must be submitted, by postal mail or courier, in English. Once a candidate is certified, he or she must be recertified every four years. Recertification requires that you earn 32 Continuing Education Hours from Next Level Purchasing, the National Contract Management Association, the Institute for Supply Management and/or its affiliates, and/or the American Production and Inventory Control Society.

Class/Exam Validity Period

Only exams passed and classes completed within five years of the postmarked date of the application can be used toward the SPSM certification.



Please submit all material with this application.
DO NOT MAIL MATERIAL SEPARATELY.

You may attach additional sheets for any section if needed.

SPSM Examination

Provide the date you passed the exam and include the score report. You are responsible for providing a copy of the official score report received after testing.

Date passed: _____

Application Checklist

- APPLICATION - Have you provided all of the requested data? **Did you clearly print how your name should appear on your certificate and award? Please be legible with upper and lowercase.**
- OPTIONAL** - BUSINESS CARD – This aids our Certification Dept. with address and name verification
- ETHICS STATEMENT SIGNATURE- Did you sign the application?
- SPSM EXAMINATION — Is a copy of your test score report attached?
- APPLICATION FEES — Have you included the required application fee and additional fees, if any?
- SHIPPING FEES – Have you included shipping fees if you wish to have your certification expedited?

Mail the application, documents and all fees to (Use only one address):

By Postal Mail to:

Next Level Purchasing, LLC.
Certification Department
P.O. Box 1360
Moon Township, PA 15108
United States of America

By courier (e.g., FedEx, UPS, DHL, etc.) to:

Next Level Purchasing, LLC.
Certification Department
1315 Coraopolis Heights Road, Suite 1001
Moon Township, PA 15108
United States of America
Phone: 1-412-294-1990
Contact: Linda Minnemeyer

Applications may be mailed or emailed. If emailing, use .pdf format and email to: studentsvicerep@nextlevelpurchasing.com



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NOTE: This application is to be used after completing the SPSM Certification Program, including all six online classes and the SPSM Exam. If you wish to sign up for the SPSM Certification Program, the appropriate forms to use can be found at <https://www.NextLevelPurchasing.com/sign-up>

Application must be completed and signed to avoid delays in processing. Please use ink and write legibly.

APPLICATION FOR:

Check One: Dr. Mr. Mrs. Ms. Miss

In the box below, clearly print your name exactly how it should appear on the certificate (we will add a comma and the SPSM credentials, for example, "Charles Dominick, SPSM"). If considering using a middle name/initial, note that names with 23 or fewer characters fit best. **This information must be provided or your application processing will be delayed.** Your certificate will be printed exactly how it appears in the box below. Any corrections necessary after printing will incur reprint charges.

ETHICS STATEMENT:

I certify that because of the confidential nature of the SPSM examination, I will not copy, retain examination questions, or disclose or transmit them in any form to any other person. I hereby state that I am working toward my SPSM designation. I understand that taking the exam for any other purposes is strictly prohibited. I further hereby agree and understand that certification may be denied or revoked, or SPSM Examination (the "Exam") scores may be invalidated by Next Level Purchasing, Inc. in the event that Next Level Purchasing, Inc. determines that an individual has (i) falsified or misrepresented information on any certification application or registration forms, or if information provided in support of obtaining or maintaining certification is found to be in error; (ii) participated in an unauthorized disclosure of examination questions, information or materials; (iii) plagiarized questions and/or answers on the Exam; (iv) mailed, received, relayed in any fashion, or used copies of the Exam materials, questions or answers without authorization from Next Level Purchasing, Inc.; (v) retained the Exam materials after the examination; or (vi) engaged in other nonprofessional behavior or dishonesty with respect to taking, administering or the preparation of others to take the Exam which results in compromising the integrity of the examination. I further authorize Next Level Purchasing, Inc. to publish (via e-mail, Web site or print) information about my certification. I hereby certify that the information submitted on or with this form is true and accurate to the best of my knowledge, and I agree to be bound by the terms and conditions set forth herein and by any and all policies and procedures of Next Level Purchasing, Inc. applicable to the SPSM program as may be amended from time to time.

Signature _____ Date _____



Please print clearly and double-check address information. Failure to provide correct mailing information may result in a delay in processing or additional mailing fees for returned packages.

EMPLOYMENT INFORMATION:

Organization Name _____

Job Title _____

Address _____

City _____ State/Province _____

Country _____

ZIP/Postal Code _____

Telephone _____

Facsimile _____

E-Mail Address _____

HOME MAILING ADDRESS & CONTACT INFORMATION:

Address _____

City _____ State/Province _____

Country _____

ZIP/Postal Code _____

Personal/Home Telephone _____

Personal E-Mail Address _____

MAIL MY CERTIFICATE & AWARD TO (check one):

(Note: If mailing preference is not specified, your certificate and award will be mailed to your home address.)

- Employer Home



APPLICATION FEES (please check appropriate box):

- Prepaid** – USD \$0
(Included as part of all-inclusive SPSM Certification Program package)
- Regular** – USD \$89
(applicable when individual classes and the SPSM Exam are paid for on a one-by-one basis "Pay-As-You-Go" as opposed to part of the all-inclusive SPSM Certification Program)
- All-Access Training Plan Enrollment**
 - Current All-Access Plan – USD \$0
(Applicant must have valid All-Access Training Plan at time of certification application)
 - Expired All-Access Plan – USD \$89
(Applicant's All-Access Training Plan has expired prior to submission of certification application)

SHIPPING FEES (please check appropriate box):

- Standard United States Postal mail**- USD \$0
(as part of SPSM Certification Program package. No Tracking number provided/available.)
- UNITED STATES Expedited Shipping (2- Day)** - USD \$20
(Available only to individuals having their certificate sent within the United States. Tracking number will be provided by email at the time of shipment.)
- CANADA/MEXICO Expedited Shipping (International Economy)** – USD \$50
(Available only to individuals having their certificate sent to Canada. Tracking number will be provided by email at the time of shipment.)
- INTERNATIONAL Expedited Shipping (International Economy)** - USD \$90
(Available to individuals having their certificate sent to destinations outside of the United States. Tracking number will be provided by email.)

PAYMENT METHOD (If applicable. Please check one):

- Check enclosed; or
- VISA MasterCard American Express Discover

Name on card: _____

Card #: _____

Expiration date (mm/yy): ___ ___ / ___ ___

Card Security Code (3 or 4 digits, usually on back of card): _____

Address where your credit card statement is sent (you may leave blank if same as the home mailing address you specified on page 2)



Questions

Questions regarding the program may be directed to Next Level Purchasing, Inc. at:

Next Level Purchasing, LLC.
P.O. Box 1360
Moon Township, PA 15108
United States of America
E-Mail: info@nextlevelpurchasing.com

Application Processing

You will receive either (a) a letter of congratulations, award, and SPSM certificate, (b) a letter of denial, or (c) a request for additional information approximately four weeks after Next Level Purchasing, Inc. receives your application.

Please note: if there are any outstanding invoices due for payment on your account, your application will not be processed until payment is made.

Documentation

Please DO NOT submit **copies** of your completed application. Next Level Purchasing, Inc. requires your original application. Failure to submit a completed application *may* result in delay of processing or denial of certification.

Appeals Process

Applicants may appeal decisions related to their application. Appeals must be submitted no more than 90 days after the application's date of rejection. Mail written requests with your complete application package to:

Next Level Purchasing, LLC.
P.O. Box 1360
Moon Township, PA 15108
United States of America

Next Level Purchasing, Inc. will review and make a final written decision based on existing policy.

Registering For The SPSM Certification Program

If you would like more information on the SPSM Certification Program, visit

<https://www.nextlevelpurchasing.com/procurement-certification/spsm>

If you wish to register for the SPSM Certification Program, please visit

<https://www.NextLevelPurchasing.com/sign-up>