



LOCAL GOVERNMENT MANAGEMENT CERTIFICATE (LGMC) PROGRAM

LGMC CREDIT REQUEST FORM FOR EDUCATION & EXPERIENCE SUBMISSION

Please read and complete the following form; then submit it with all supporting documentation and materials that help make the case for consideration to meet requirements in the **requested** core area.

- #1 – Budget & Finance
- #2 – Human Resource Management
- #3 – Public Safety & EMS Management
- #4 – Public Works & Utilities
- #5 – Land Use & Economic Development
- #6 – Public Contracting & Purchasing
- #7 – Community Relations
- #8 – Risk Management
- #9 – Elected Officials/Mngr Competencies
- #10 – Ethics & Leadership

General Information:

Submission Date: _____

Name: _____

Title: _____

Daytime Phone: _____

E-Mail: _____

Coursework:

Only graduate-level masters or doctoral coursework that directly applies to the core area will be considered adequate to meet certificate requirements. A maximum of 10 hours in any one core area may be met through graduate-level coursework. **Only coursework completed within the last 10 years will apply. No more than two core areas may be met with coursework.**

Name of Certificate Applicant: _____

Graduate Level Credits Received From: _____

Course Title: _____ Qtr/Sem. & Year: _____

Requested Core Area #: _____ & Name: _____ Requested Hours: _____

For credit consideration, attach transcript copies as supporting documentation (*check box and attach documentation*)

Work Experience:

Only management-level experience in a government entity that directly applies to the core area will be considered to meet the requirements of the certificate. A maximum of 10 hours in any one core area may be met through experience. **Only experience exhibited within the last 10 years will apply.** To receive credit for experience, the applicant **must** meet the following criteria. (1) At least 3 years experience; (2) The core area must have been the primary function of the job for all 3 years (i.e. Finance Director or accountant, Planning Director or planner); (3) And **no more than two core areas** may be met with experience, **each** will need at least 3 years with primary responsibility in the core area.

Work Experience Employer: _____

Work Experience Job Title: _____

Supervisor's Name: _____ Phone: _____

Requested Core Area #: _____ & Name: _____ Requested Hours: _____

Dates of Employment: _____

Notes: _____

For credit consideration, attach job description and addendum detailing how management-level duties relate to requested core area as supporting documentation (*check box and attach documentation*).

Submit this request form and all supporting documents to:

League of Oregon Cities – LGMC Request for Consideration – Attention: Lisa Trevino
Fax: (503) 399-4863 - Email: ltrevino@orcities.org - Call: (503) 588-6550
Mail: 1201 Court Street NE, Suite 200, Salem, OR 97301