

## **Institute of Management Accountants**

### **Portland Chapter**

### **Scholarship Program**

The Portland Chapter of the Institute of Management Accountants has established a scholarship program which more effectively directs scholarship funds towards encouraging new IMA membership and CMA professional growth. The following criterion identifies those individuals interested in CMA programs and offsets some of their costs of obtaining certification:

- New regular or student members may apply for a \$200 scholarship if they agree to
  - Enroll as a new IMA regular or student member and affiliate with the Portland Chapter.
  - Enroll in an IMA-endorsed CMA study program.
- All IMA Portland Chapters members may apply for a \$100 reimbursement for each:
  - Completion of an IMA-endorsed CMA study program.
  - Each CMA exam part passed.
- Annual limit of \$500 per individual, per year.
- Lifetime limit of \$1,000 per individual.
- Repeat enrollments in one of the four-part study programs are not eligible.
- If an individual drops out of a CMA study program and receives a refund, the individual will share the refund with the IMA Portland Chapter prorated according to the IMA Portland Chapter portion and the individual's portion.

In order to fund this program, we will request donations from members once a year, stipulating donation to a restricted fund for scholarships.

### **Scholarship Program Application**

Please attach a copy of the following documents as applicable:

- A printout of your online membership application from [https://www.imanet.org/membership\\_join.asp](https://www.imanet.org/membership_join.asp) or the PDF version at the end of this document.
- A copy of your CMA study program receipt for funds paid if you are applying for reimbursement of an IMA-endorsed CMA study program
- A copy of third-party documentation attesting to your successful completion of a CMA exam if you are applying for reimbursement for a CMA exam.

+ + + **MEMBERSHIP APPLICATION** + + +

<input type="checkbox"/> <b>New Application</b>  <input type="checkbox"/> <b>Renewal</b>  <input type="checkbox"/> <b>Certification</b> <i>(IMA membership required)</i>	<b>PERSONAL INFORMATION</b> <i>(please print)</i>  <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.      Last/Family Name/Surname: _____  First/Given Name: _____ Middle Initial: _____ Suffix: _____  Date of Birth (month/day/year): ____/____/____
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*Please indicate your contact preference:*

<input type="checkbox"/> <b>BUSINESS MAILING ADDRESS:</b> <i>(See reverse side to enter SIC, job title, and responsibility codes)</i>  Title: _____  Company Name: _____  Street/P.O. Box: _____  _____  City: _____  State/Province: _____  Zip Code/Postal Code: _____  Country: _____  Business Phone: <i>(Include Country/Area/City Codes)</i> _____	<input type="checkbox"/> <b>HOME MAILING ADDRESS:</b>  Street/P.O. Box: _____  _____  City: _____  State/Province: _____  Zip Code/Postal Code: _____  Country: _____  Phone: <i>(Include Country/Area/City Codes)</i> _____  E-mail Address: _____ Fax: _____
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**EDUCATION HISTORY**

	<i>Name of Institution</i>	<i>Degree</i>	<i>Major</i>	<i>Date Received/Expected</i>
Undergraduate:	_____			
Graduate:	_____			
Professional Designations Earned:	<input type="checkbox"/> U.S. CPA <input type="checkbox"/> CFA <input type="checkbox"/> CIA <input type="checkbox"/> Other: _____			

**CHAPTER AFFILIATION**

See a list of Regular/Student Chapter options by visiting our website [www.imanet.org](http://www.imanet.org), or call (800) 638-4427.

Chapter Name: \_\_\_\_\_ Chapter Number: \_\_\_\_\_

Member-At-Large (Check here if no chapter affiliation is desired)  
 International Member-At-Large

**A. MEMBERSHIP INFORMATION** *(All payments must be in U.S. Dollars)*

- Regular Membership** ..... \$195.00  
*(You must reside in the U.S., Canada, or Mexico)*
- International Membership** ..... \$195.00  
*(Available to professionals residing outside the U.S., Canada, or Mexico)*
- Student Membership** ..... \$ 39.00  
*(You must be taking 6 or more hours per semester and reside in the U.S., Canada, or Mexico)*  
Expected Graduation Date (Year) \_\_\_\_\_
- Associate Membership**  
*(You must apply within 2 years of completing full-time studies and reside in the U.S., Canada, or Mexico)*  
Select One:  1st year after graduation ..... \$ 65.00  
                   2nd year after graduation ..... \$130.00
- Academic Membership** ..... \$ 98.00  
*(You must be a full-time faculty member and reside in the U.S., Canada, or Mexico)*

**B. OPTIONAL SERVICES**

*(IMA membership required. All payments must be in U.S. Dollars)*

- Member Interest Groups** ..... \$ 75.00 each  
 Controllers Council    Cost Management Group    Small Business Council
- CPE Offerings** *(Prices valid through 12/31/08)*
  - IMA Ethics Series: Success Without Compromise (4 CPE) ..... \$ 75.00\*
  - IMA Ethics Series: Fraud in Financial Reporting (2 CPE) ..... \$ 59.00\*
  - IMA Knowledge Exchange (Unlimited CPE) ..... \$274.00\*\*
  - IMA Advantage (Unlimited CPE) ..... \$274.00\*\*
  - IMA Knowledge Exchange/Advantage Combo ..... \$409.00\*\*
  - IMA CPEDge (24+ CPE) ..... \$187.00\*\*  
 \*Valid for 60 days from date of purchase.    \*\*Valid for 365 days.
- Certification**    CMA
  - Certification Entrance Fee *(One-time payment)* ..... \$125.00  
*(Except for students in the U.S., Canada, and Mexico)*
- Exam Waiver Fee** *(See [www.imanet.org](http://www.imanet.org) for more information)* ..... \$140.00

**C. REGISTRATION FEES**

- Membership Registration Fee** ..... \$15.00  
*(All new members except Students and Associates)*
- Reinstatement Fee** ..... \$15.00  
*(If your membership has lapsed for 90 days, a \$15.00 reinstatement fee applies)*

**TOTAL DUE (add sections A, B, and C)** ..... \$ \_\_\_\_\_

**APPLICANT STATEMENT**

- Check here if you have ever been convicted of a felony. Please enclose a confidential letter with a brief explanation of circumstances to the attention of President & CEO.

**I affirm that the statements on this application are correct, and I agree to abide by the Statement of Ethical Professional Practice.**

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

IMA occasionally makes available its members' addresses (excluding telephone and e-mail) to vendors who provide products and services to the management accounting and finance community. If you prefer not to be included in these lists, please check this box.

**PREFERRED METHOD OF PAYMENT**

*(All payments must be in U.S. Dollars)*

- Wire Payments** .....  
*All wire transfers must be made with bank fees prepaid. Please notify IMA by e-mail (dhuckins@imanet.org) that you are paying by wire transfer. Include your name, amount sent, and wire transfer receipt number.*
- Check Payments**  
My check for \$ \_\_\_\_\_, payable to IMA, is enclosed.  
*No checks drawn on foreign banks will be accepted unless they are payable through U.S. correspondent banks and in U.S. dollars.*
- Credit Card Payments**  
Charge my credit card:  AMEX  Discover  MasterCard  VISA  
Card Number: \_\_\_\_\_ Exp.: \_\_\_\_\_  
Cardholder Name: \_\_\_\_\_  
Signature: \_\_\_\_\_

**CMA CERTIFICATION PROGRAM**

IMA membership required. If you are applying to the certification program for the first time, please check the appropriate box and enclose the Certification Entrance Fee (\$125.00) required of new certification applicants only. (Students in the U.S., Canada, and Mexico are exempt.)

- Applying as a Student (*U.S., Canada, and Mexico only*) — Upon graduation, arrange for an official copy of your transcript to be sent.
- Applying as Faculty (*U.S., Canada, and Mexico only*) — Please provide a letter on school stationery affirming full-time teaching status.

*Please complete the Additional Educational Information below:*

**ADDITIONAL EDUCATIONAL INFORMATION**

Check the appropriate box and make arrangements for supporting documents to be forwarded to the IMA certification department. Only one form of credentials is required.

- Later** — By selecting this option, many applicants choose to provide their educational credentials after completing the exams.  
If you would like to have your credentials reviewed prior to taking the exams to ensure that they are acceptable, please select one of the options below. Please note that the educational requirement must be fulfilled prior to certification.
- College Graduate** — Submit official transcript (translated into English) showing university degree conferred and official university seal, or arrange to have proof of degree sent directly from university.
- GMAT or GRE Scores** — Provide copy of scores.
- U.S. CPA Exam, U.S. CFA Exam, or other acceptable certification or license** — Arrange to have proof sent directly from your certifying organization. Acceptable designations are listed at [www.imanet.org](http://www.imanet.org).

**Strategic Finance Magazine**

*Subscription rates per year:*  
Members: ..... \$ 48 (Included in dues, nondeductible)  
Student Members: ..... \$ 25 (Included in dues, nondeductible)

**Management Accounting Quarterly**

*Subscription rates per year:*  
Members: ..... \$ 10 (Included in dues, nondeductible)

**SIC CODE – STANDARD INDUSTRY CLASSIFICATIONS**

- (Please Circle One)*
- 01 Education
  - 02 Healthcare
  - 03 Media and Entertainment
  - 16 Construction, Mining, Agriculture
  - 21 Manufacturing
  - 41 Transportation, Communication, Utilities
  - 51 Wholesale/Retail Trades
  - 61 Finance
  - 63 Insurance
  - 81 Business Services
  - 82 Real Estate
  - 86 High Tech
  - 90 Nonprofit
  - 93 Government
  - 96 Pharmaceuticals & Biotechnology
  - 99 Other \_\_\_\_\_

**JOB TITLE CODE**

- (Please Circle One)*
- 05 Executive Officer
  - 11 Corporate Officer
  - 15 Vice President
  - 31 Controller
  - 33 Chief Financial Officer
  - 35 Director/Manager
  - 41 Supervisor
  - 47 Accountant
  - 51 Analyst
  - 55 Programmer
  - 57 Administrative
  - 59 Consultant
  - 65 Academic
  - 99 Other \_\_\_\_\_

**RESPONSIBILITY CODE**

- (Please Circle One)*
- 01 General Management
  - 05 Corporate Management
  - 10 Public Accounting
  - 15 General Accounting
  - 20 Personnel Accounting
  - 25 Cost Accounting
  - 30 Government Accounting
  - 33 Environmental Accounting
  - 35 Finance
  - 40 Risk Management
  - 45 Budget and Planning
  - 50 Taxation
  - 55 Internal Auditing
  - 60 Education
  - 65 Information Systems
  - 70 Student
  - 75 Retired
  - 80 Other \_\_\_\_\_

**MEMBER PROFILE**

- 1. Do you have international responsibilities?**  
 Yes  No
- 2. Does your company have international locations?**  
 Yes  No
- 3. Who will pay your IMA dues?**  
 Me  My Company
- 4. What are you looking for most from your IMA Membership?**  
 Career assistance  Professional networking  
 Certification  Industry news  
 Education  Leadership training  
 CPE  Research  
 Other (please specify) \_\_\_\_\_
- 5. Are you a member of any other association?**  
 AAA  AFP  AICPA  ASWA  
 CFA Institute (AIMR)  FEI  IIA  
 Other (please specify) \_\_\_\_\_
- 6. Is your organization:**  
 Public sector  Nonprofit  
 Private sector  Government
- 8. How did you learn about IMA?**  
 Chapter meeting  Marketing piece  
 IMA educational program  Company recommended  
 IMA website  Industry associate  
 Industry publication  Professor  
 Other \_\_\_\_\_  
 Other website \_\_\_\_\_
- 9. How many employees are in your company or organization?**  
 Under 50  51-100  101-200  201-500  
 501-1,000  1,001-10,000  Over 10,000
- 10. What is your company's current annual revenue?**  
 Under \$1 million  \$500 million - \$1 billion  
 \$1 - \$10 million  \$1 billion - \$5 billion  
 \$10 - \$100 million  \$5 billion - \$10 billion  
 \$100 - \$500 million  Over \$10 billion

*Please send your completed application and payment (made out to IMA) to:*

**INSTITUTE OF MANAGEMENT ACCOUNTANTS, INC.**

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