APPLICATION FOR ACCREDITATION

PERSONAL INFORMATION CONFIDENTIAL

NAME

LAST FIRST INITIAL(S)

ADDRESS

STREET CITY PROVINCE

POSTAL CODE WORK TEL. HOME TEL.

FAX EMAIL

Number of years in public relations practice: _____Year CPRS membership activated: _____

REFERENCES

Please list three references who can attest to your standards of professional conduct. They should also be able to indicate your standing among professional categories as a representative of the practice of Public Relations. Two references must be accredited members of CPRS in good standing who are acquainted with you. The third reference may be from among present or former employers or clients, or others who have worked closely with you. Immediate supervisors and managers may not give a reference on your behalf. National Council on Accreditation members should not be used for references.

NAME

LAST FIRST TITLE

ADDRESS

COMPANY STREET PROV. P.C.

PHONE EMAIL

NAME

LAST FIRST TITLE

ADDRESS

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PHONE EMAIL

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ADDRESS

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PHONE EMAIL

GENERAL INFORMATION

Please attach a current resume listing employment history, education, interest and all voluntary public relations activities within the community. Applicants ***must*** submit a <u>one-page</u> project overview explaining the nature and scope of the proposed work sample and extent of their role in the project.

Do you practice or teach public relations, or administer a full-time public relations department for more than half of your working time? Yes ❑ No ❑

If you are awarded Accreditation, how do you wish your name to appear on your certificate?_____

If you are awarded Accreditation, would you like your work sample ❑ Returned
❑ Sent to the National Resource Library (hard copy and scanned electronic copy)

❑ I agree the above facts are correct
❑ I agree to abide by the final decision of the National Council on Accreditation and its examiners in the matter of my Accreditation.
❑ I agree to allow the National Council on Accreditation to make any inquiries to my references to ascertain my eligibility for Accreditation. CPRS will not contact any other individuals without your consent.
If you have any questions about how this information will be used please contact Karen Dalton, APR Executive Director.

SIGNATURE _____ DATE_____

❑ Additionally the Accreditation Chair in your Society may offer a variety of services to candidates including information sessions, coaching, mentoring, etc. Please indicate, by ticking the box, if you agree to allow CPRS to notify the Accreditation Chair in your Society of your application.
❑ Further, I authorize CPRS to notify the Accreditation Chair in my Society of my progress throughout the accreditation process.

Accreditation fee is $400 and can be paid by cheque made payable to Canadian Public Relations Society or credit card Visa/AMEX/Mastercard

<u>Applications will not be processed without full application fee</u>

CARD NO. EXPIRY DATE:

SIGNATURE

National Office: 4195 Dundas Street West, Suite 346, Toronto, Ontario, M8X 1Y4.
Phone: (416) 239-7034 Fax: (416) 239-1076 Email: admin@cprs.ca www.cprs.ca

The Canadian Public Relations Society, Inc.

Updated October 2008

APPLICATION FOR ACCREDITATION

Work Sample Overview – guidelines for preparation

Please describe the project you intend to submit for the work sample component of your accreditation process.

Please use the following template to ensure your one-page description outlines the scope of the project and your role in it, and contains at least the following information:

Scope:

- An overview of the project
- The organizational and PR goals the project was intended to serve and how these relate to the evaluation of your project
- The approximate date of project completion*

Your role:

- Your involvement in the decision to launch the project, or the point at which you became the lead PR practitioner for the project
- A discussion of your role in the research, analysis, communication and evaluation related to the project
- Whether you worked alone, as team leader, or as a member of a team
- What staff or consultant support was available for the project

* Please note that your work sample should be as current as possible (e.g., a work sample will be considered if it was initiated, completed and evaluated within two years prior to your application).

For more information on the work sample overview, work sample requirements and the accreditation program in general, please see the Accreditation Handbook.

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Canadian Public Relations Society, Inc.
Accreditation Work Sample Overview Template

The following form is designed to assist you in completing your work sample overview.

This step in the process was established to ensure that your work sample meets the ownership requirement and that the project is of sufficient scope. Introducing this step has eliminated candidates being disqualified for lack of ownership or scope **after** they have completed and submitted their work sample. It has also reduced the number of work sample failures.

If you have any questions about this step or the accreditation process overall, please visit our website at www.cprs.ca/accreditation, speak to your local accreditation chair, or contact Larisa Morton at the CPRS National Office at lmorton@cprs.ca.

Name: Date:

SCOPE

1. Describe your project (max. 100 words):
2. In point form, list the organizational and PR goals the project was designed to support:
3. In point form, list the outcomes achieved by this project (i.e. how your stated goals were met):
4. When was this project completed:

ROLE / OWNERSHIP

1. At what point in the project did you get involved?
2. Briefly summarize your role in each of the following stages of the project:
   a. Research -
   b. Analysis -
   c. Communication -
   d. Evaluation -
3. Were you: (check one)
   The sole person working on this project,
   The project team leader, or
   A member of the project team.
4. Briefly describe any staff, consultant or contractor support you received on this project:

Please submit this completed form with your accreditation application by December 1st.

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