

CIMA

CPD ACCREDITED 2009

# CIMA CPD Product Accreditation Scheme application form

your quality link



# Application form

## CPD Product Accreditation Scheme

### Primary details

Organisation name (and parent organisation's name if relevant)

Address

Tel

Fax

Email

Website address

**Name of primary contact**

Job title

Tel

Email

**Name of secondary contact**

Job title

Tel

Email

### About the product

Product name

What does the product/service set out to achieve and how does it propose to do so? (no more than 150 words)

Please tick to indicate the category/categories that the product or service type falls into:

Qualification

Online conference

Face to face course

Electronic copy learning resource

Face to face conference

Webcasts/webseminars

In company/customised course

Consultancy

Printed learning resource

Mentoring/coaching

E-learning course

Other (please state) \_\_\_\_\_

Please tick to indicate which of the following CIMA CPD competencies are covered by the product/service: (for further details on these competencies, see appendix1)

Accountancy profession

Organisational management

Compliance

Strategic management

Corporate finance and treasury

Business skills

Governance

People skills

Management accounting

Soft skills

Financial accounting

Other (please state) \_\_\_\_\_

Please tick to indicate whether the product/service is targeted towards individuals, organisations or both:

Individuals

Organisations

Both

## About the product

Please tick to indicate what industry sectors are targeted by the product/service:

- |   |   |
|---|---|
| <input type="checkbox"/> All of the below                   | <input type="checkbox"/> Hotel/catering/travel      |
| <input type="checkbox"/> Advertising/publishing/media       | <input type="checkbox"/> IT/telecommunications      |
| <input type="checkbox"/> Agriculture/forestry               | <input type="checkbox"/> Import/export              |
| <input type="checkbox"/> Construction/property              | <input type="checkbox"/> Leisure/arts/entertainment |
| <input type="checkbox"/> Distribution                       | <input type="checkbox"/> Manufacturing              |
| <input type="checkbox"/> Engineering                        | <input type="checkbox"/> Professional services      |
| <input type="checkbox"/> Financial services                 | <input type="checkbox"/> Utilities                  |
| <input type="checkbox"/> Food/drink                         | <input type="checkbox"/> Other (Please state) _____ |
| <input type="checkbox"/> Government/public sector/education |   |
| <input type="checkbox"/> Healthcare/pharmaceutical          |   |

Please tick to indicate how long the product or service has been in operation:

- |  |   |
|--|---|
| <input type="checkbox"/> Not yet launched  | <input type="checkbox"/> Under five years |
| <input type="checkbox"/> Under one year    | <input type="checkbox"/> Over five years  |
| <input type="checkbox"/> Under three years |   |

Please tick to indicate the experience level that the product/service is aimed towards:

- |                                       |                                       |                                   |
|---------------------------------------|---------------------------------------|-----------------------------------|
| <input type="checkbox"/> Introductory | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced |
|---------------------------------------|---------------------------------------|-----------------------------------|

Please give details of any prerequisites required in order to enrol and/or use the product or service, such as qualifications or experience:

---

---

---

---

Please give details relating to the cost and rate card of the product/service:

---

---

---

---

Please provide details of any user assessments involved including how these are conducted:

---

---

---

Please provide details of any quality monitoring procedures for the delivery of the product/service:

---

---

---

Please provide details about any outside agencies/personnel used to help deliver the product/service: (this may include venues)

---

---

---

---



## About the product (continued)

Please provide details of how the introduction of new subjects will be decided if it is planned that the subject matter of the product will change over time:

---

---

---

Please provide details of any other professional body or accreditation scheme membership that the organisation or product has:

---

---

---

Please provide details on the key benefits for users using the product/service against other similar products or services: (no more than 200 words)

---

---

---

---

---

---

---

---

---

---

Please give details of how presenters or lecturers or other staff are trained or monitored:

---

---

---

---

Please provide the dates and locations for which the course or conference will run: (if applicable)

---

---

---

Please give details on the duration of each course or conference:

---

---

---

---

How many CPD hours/credits does the product provide? (if applicable)

---

---

## About the organisation

Please provide the organisation's mission statement: (if relevant)

---

---

---

---

---

Please give details of the legal entity: (partnership, limited company, public limited company etc.)

---

---

---

---

Please give details of how long the organisation has been established and operating for:

---

---

Please list and provide information on the primary products or services that the organisation specialises in:

---

---

---

---

---

---

Please state where the organisation is primarily based:

---

---

Please give a brief description of the organisation's primary strategic activities and plans: (no more than 200 words)

---

---

---

---

---

---



## Accompanying application documents

Please tick which documents have been included to support the application in accordance with the Accreditation Guidelines and Policy:

- Business registration documents and core financial statements such as an annual review or similar
- Details for independent access to the product or service for quality assurance purposes
- Evidence relating to the history of the product's operation, if applicable
- Details of membership to any other professional bodies or accreditation schemes (e.g. ISO)
- Satisfaction survey results (if such research exists) for the product or service
- Copies of advertisements and any other marketing literature used to support the product
- Copies of any policies in place to support the product or service
- Application fee

Additions for courses:

- Syllabi details for courses
- Briefs into presenter's professional background including a biography
- Evidence of any policies and procedures that are in place to determine the suitability of presenters
- Details of how any training and development will be conducted
- Evidence to demonstrate the suitability of any venue and/or location
- Samples of learning materials such as workbooks

Additions for qualifications:

- Syllabi details for qualifications
- Details of assessment or grading structures
- Pass levels and rates

## Declaration

- I declare that all of the information set out within this application form is accurate and correct.
- I have read, understood and will abide by the CIMA CPD Product Accreditation Scheme obligations and code of practice as set out in the Application Guidelines and Policy.
- I have read the application requirements in the Application Guidelines and Policy and have enclosed the necessary documentation as requested.

Signature

Name

Job title

Organisation

Date

Please send the signed application form together with any supporting materials to:

### CIMA CPD Product Accreditation Scheme

Centre of Excellence  
The Chartered Institute of  
Management Accountants  
26 Chapter Street  
London SW1P 4NP  
United Kingdom

F. +44 (0)20 8849 2277 | E. [cpdaccreditation@cimaglobal.com](mailto:cpdaccreditation@cimaglobal.com) | [www.cimaglobal.com](http://www.cimaglobal.com)

RT031V0107

