

Certification For Municipal Professionals

NEW APPLICATION

City Clerk OR Finance Officer





Revised 3.26.2025

NEW CERTIFICATION

Please select one *separate application is required for each certification.

- □ Iowa Certified Municipal Clerk (3 years of experience required)
- □ Iowa Certified Municipal Finance Officer (5 years of experience required)

PLEASE CHECK EACH BOX THAT IS APPLICABLE AND ENCLOSE THE REQUIRED SUPPORTING MATERIALS:

- □ I am currently a Municipal Clerk, Deputy Clerk, Finance Officer, Administrator or Treasurer.
- □ I am currently a member of IMFOA and have been a member for three (3) consecutive years within The last five (5) years. Membership ID #_____
- □ I have attended at least one IMFOA conference (for a minimum of 5 hours) in the past four years. Please list date of attendance ______
- □ I have <u>listed the needed courses on my application</u> **AND** <u>have included my dashboard with the listed</u> classes <u>highlighted</u>.

(PLEASE NOTE: Classes can only be used ONE time and <u>cannot</u> be used on more than one certification.)

- \Box I have enclosed the \$150 application fee.
- □ I have completed the Municipal Professionals Institute. Year Completed_____
- □ I am currently an Iowa Certified Municipal Clerk.
- □ I am currently an Iowa Certified Municipal Finance Officer.
- \Box I acknowledge that I must renew my certification every 4 years.

BASIC INFORMATION

Name		
Last	First	Middle
(Use Name as Shown	on IMFOA ID and/or dashboard)	
Other name(s) you may have	used (Maiden name; Nickname)	
Title	E-mail	
Municipality	Date Hired	
Mailing Address	P.O. Box	
City	Zip Code _	
Phone	Alternate Phone	

EMPLOYMENT DATES AND POSITIONS

Current Municipal E	mployer			
Current position		Date ye	ou began this position	
	Same Employer	_Starting Date	End Date	
Previous Municipal employment (location/dates)				

MEDIA RELEASE (optional)

We are proud of your accomplishment and would like to send a press release/letter to one (1) local paper and/ or one local government official like your city manager or mayor. This is optional and you can leave this section blank if you prefer.

Local Newspaper

Name	Email		
Government Official			
Name	Title		
Email			
Address	City	State	ZIP
PLEASE MAIL APPLICAT	ION AND FEES TO:		
IMFOA Certification Review	Committee		

IMFOA Certification Review Committee Attn: Barb Barrick 515 N. Main Huxley, IA 50124

<u>The committee that reviews the applications are volunteers.</u> It may take as long as 8-12 weeks before you receive your acknowledgement. Thank you for your patience and understanding!

EDUCATION

IMPORTANT: PLEASE READ ALL OF THE INSTRUCTIONS BELOW BEFORE COMPLETING THIS PORTION OF THE APPLICATION! INCOMPLETE APPLICATIONS WILL BE RETURNED.

- 1. A link to find a list of classes you have taken on the IMFOA dashboard is found here: https://imfoa.com/account/
- 2. You must **WRITE/TYPE** the hours and classes you are using for the certification you are applying for on the sheets provided. You may use a second sheet to list classes if needed.
- 3. Please include a copy of the dashboard, <u>highlighting</u> the classes you are using.
- 4. All workshops, courses, or educational offerings must be approved by the Curriculum Committee and will be listed on your dashboard as proof of attendance.
- 5. Classes on the dashboard might be LISTED in more than one place but you can only use the class ONE TIME either in Basic, Flexible or Specialized on one certification.
- 6. Classes need to be during the renewal period. Classes taken prior to renewal date will not be considered.
- 7. CLASSES CAN ONLY BE USED ON ONE CERTIFICATION TYPE, AND CANNOT BE DUPLICATED FOR A DIFFERENT CERTIFICATION. If you are applying for your <u>second</u> certification you only need to submit <u>25 hours of specialized credits</u>, as you've already submitted your basic and flex.
- 8. Application and Code of Ethics (located on the last page of the application) <u>must be signed and dated before application will be considered.</u>

Note: IMFOA Certification Application Process FAQ's can be found at <u>www.imfoa.com</u> - Certification Program tab.

BASIC CURRICULUM 50 education hours are required from Iowa State University Municipal Professionals Institute.

*Date you completed 50-hour Core Curriculum _____ (required)

Please LIST classes <u>and</u> include a copy of your dashboard with classes highlighted.

DATE	COURSE TITLE	SPONSOR	CONTACT HOURS

FLEXIBLE CURRICULUM - (25 education hours)

Please LIST classes and include a copy of your dashboard with classes highlighted.

- Regional Clerk's meetings–5 hours per year maximum
- Athenian Program–6 hours per year maximum
- Associate Degree will be awarded 15 hours credit and Bachelor's Degree or above will be awarded 25 hours credit if it meets below description

Degree must be in one of the following: public administration, urban affairs municipal management, political science, records management, municipal finance, governmental accounting, urban planning, or personnel administration.

DATE	COURSE TITLE	SPONSOR	CONTACT HOURS
L			

<u>SPECIALIZED CURRICULUM</u> - (25 education hours)

Please LIST classes <u>and</u> include a copy of your dashboard with classes highlighted.

DATE	COURSE TITLE	SPONSOR	CONTACT HOURS

MUNICIPAL OFFICER CODE OF ETHICS

As a Municipal Officer, I believe:

That the proper operation of democratic government and fiscal administration requires that public employees be independent and impartial in their judgment and actions; that decisions and policy be made in the proper channels of the governmental structure; that public office not be used for personal gain; and that the public have confidence in the integrity of its government and employees.

Consequently, I believe it is my duty to:

- 1. Respect the importance of American ideals of government, the rule of law, and ethical conduct in the performance of my municipal duties.
- 2. Work in full cooperation with other public employees in promoting the public welfare, recognizing that my private interest must be subordinate to the public interest.
- 3. Be scrupulously honest in handling public funds and in the conservation of public property, never using any funds or property under my care for private benefit of myself or others.
- 4. Refrain from disclosing confidential information concerning the city government, or granting any special treatment, consideration, or advantage to any citizen beyond that available to every other citizen.
- 5. Refrain from accepting gifts or favors or promise of future benefits which might compromise my independence of judgment or action as a City Clerk / Finance Officer.
- 6. Conduct myself in my private affairs in such a manner as not to bring discredit to public service, or the community and City Council which I serve.
- 7. Endeavor always to establish and maintain the highest standards of fiscal administration.

 \Box I hereby apply for certification under the Iowa Certification for Municipal Professionals Program, and attest that the previous statements and presentations are accurate and true to the best of my knowledge. I further attest to support the <u>Municipal Officer Code of Ethics</u>. I acknowledge that continuous membership in IMFOA is required to retain and use the Iowa Certification designation(s) and that <u>I must renew my certification(s) every 4 years</u>.

Printed Name_____

Signature

Note: Electronic Signature will not be accepted!

Date ____

(this will be your beginning certification date)