

National Association of Credit Management
8840 Columbia 100 Parkway
Columbia, MD 21045-2158



Instructor Application

Potential course instructors for the National Association of Credit Management (NACM) must meet the following minimum requirements: a Bachelor's degree, an industry designation (CCE is preferred), significant industry experience, and two to three years teaching experience. All new instructors will be required to: 1) participate in a training and orientation program conducted by a senior NACM professional educator and/or 2) teach on a probationary status for two semesters. If the minimum requirement for teaching experience is not met, instructors must attend a formal adult education teaching course to meet that requirement.

Name _____ Birth Month/Day (MM/DD) _____

Home address _____

City _____ State _____ Zip code _____

Home phone _____ Home fax _____ Email _____

NACM affiliate site location _____

Teaching assignment preference

1. _____

2. _____

3. _____

Current employment history

Employer _____

Address _____

City _____ State _____ Zip code _____

Work phone _____ Work fax _____ Email _____

Current job title _____

Immediate supervisor _____

May we contact your employer? ☐ Yes ☐ No

Previous employment history

Company and address	Position held	Dates (from-to)
_____	_____	_____
_____	_____	_____
_____	_____	_____

Academic background

Degree(s)	College/University	Major or special area	Date completed
_____	_____	_____	_____
_____	_____	_____	_____

Professional designations, credentials, certificates

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Distinctions (scholarships, awards within the industry, honors)

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Publications

<hr/>	<hr/>
<hr/>	<hr/>

Professional involvement

<hr/>	<hr/>
<hr/>	<hr/>

Professional affiliations/memberships (indicate any positions held)

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Teaching experience

(1) Course name

College/University/Program

Location

Dates (from-to/month and year)

(2) Course name

College/University/Program

Location

Dates (from-to/month and year)

I affirm that the above information is true to the best of my knowledge. The National Association of Credit Management registrar has my approval to verify/contact any of the information provided.

I understand that if I am approved as an NACM instructor, I agree to use the CAP/ACAP instructional materials provided by NACM for the sole purpose of teaching the CAP/ACAP classes. I further agree not to reuse or use the materials provided by NACM for any other purpose. Upon my separation from the NACM Affiliate or when I stop teaching the CAP/ACAP classes, I agree to surrender all materials and return them to the NACM Affiliate.

Signature _____ Date _____

Return completed application to:
education_info@nacm.org

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8840 Columbia 100 Parkway
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P: 410.740.5560 F: 410.740.5574