



Jail Association
Jail Manager Certification Commission

CJM RECERTIFICATION APPLICATION

You have two options to apply for recertification:

1. Professional Points Accumulation
2. Re-Examination

Option 1: Professional Points Accumulation

- Mark the appropriate box at the top of the *CJM Recertification Application Form*.
- **PLEASE NOTE:** Only **350** accumulated professional points are required between your initial examination (or recertification) date and the date you apply for recertification. Of the 350 points, under the Leadership activities (Section 3) of the application, **20 points** must have occurred within the last FOUR years to be eligible for recertification.
- Mail your completed CJM Recertification Application to AJA at least six (6) weeks BEFORE your certification anniversary date expires. If your application is postmarked after six (6) weeks, a \$75 late fee will be assessed. Fees are subject to change.

Fees: *AJA Member: \$150 (Individual) Nonmember: \$210*

Option 2: Re-examination

- Mark the Re-Examination box at the top of the *CJM Recertification Application Form*.
- Fill out the designated pages and a minimum of **three** original potential CJM examination questions along with supporting documentation.
- If paying via credit card, you may scan the entire application and supporting documentation into **one pdf** document and email to certification@aja.org **six weeks before** your certification anniversary date expires. If your application is received late, a \$75 late fee will be assessed. Fees are subject to change.
- If paying with check or PO, you must mail your completed application with payment to AJA Headquarters **six weeks before** your certification anniversary date expires. If your application is received late, a \$75 late fee will be assessed. Fees are subject to change.
- Once the application is reviewed, you will be emailed the examination instructions.

Fee: *\$300*

RECERTIFICATION ELIGIBILITY REQUIREMENTS

To be eligible for recertification:

1. The CJM must be employed full-time as a paid jail manager until the expiration date of his/her current certification,

or, if at the time of application for recertification, the CJM is not currently working in the field, he/she must have no more than a two-year lapse of employment as a paid jail manager (counting back from the certification expiration date). If the CJM is not currently employed as a jail manager or will be leaving the field of jail management prior to his/her certification expiration date, a statement of intention to reenter the field of jail management (within the two-year period allotted) must accompany the application for recertification. The CJM must then notify AJA when employment as a paid jail manager commences.

or, if at the time of application for recertification, the CJM no longer meets the definition of a jail manager, the designation may be maintained if the CJM has recertified at least once prior to the current application. The CJM must also maintain activity in the field of corrections as evidenced by completion of the recertification application requirements.

2. It is the responsibility of the candidate to obtain the latest and most current copy of the Recertification Application.
3. The CJM must agree to adhere to the AJA Code of Ethics.

LOSS OF CERTIFICATION WHEN RECERTIFICATION REQUIREMENTS ARE NOT MET

CJMs who do not apply for recertification or who fail to meet the criteria required for recertification by their certification date (**four** years from previous certification date) will be suspended and lose the right to use the CJM designation and will no longer be listed as a CJM by the JMCC or in any AJA publication.

If certification is suspended, and at some point, in the future the former CJM decides to become certified again, he/she will be required to go through the entire certification process again, including taking the examination.

REVOCATION OF CERTIFICATION

Certification may be revoked or denied for any of the following reasons:

1. Falsification of an application and/or EBF,
2. Misrepresentation of certification,
3. Breach of existing ethical standards of professional practice.

An appeals mechanism for challenging revocation or denial of certification is available.

CERTIFIED JAIL MANAGER PROGRAM DEFINITIONS

For the purposes of the Certified Jail Manager Program:

DEFINITION OF A JAIL MANAGER

A person (sworn or civilian) who directs, administers, and/or is in charge of the operations of a jail facility, bureau, division, department, shift, or program.

DEFINITION OF A JAIL

1. A county, municipal, tribal or regional facility that houses pretrial and sentenced inmates; and/or an institution that houses pretrial and sentenced inmates where the state is responsible for jail operations (Alaska, Hawaii, Rhode Island, Connecticut, Vermont, Delaware); and/or a private facility that houses pretrial and sentenced inmates and exists to serve the local jail needs of the community where it operates.

And/or

2. A facility that houses ONLY pretrial detainees, regardless of what entity operates it. This includes, but is not limited to facilities that house persons for less than 72 hours (lock-ups), facilities that house Federal or military custody inmates awaiting trial (e.g. ICE, Marshals, Armed Forces), institutions where the State is responsible for the operations of jails, and private facilities.

And/or

3. A local government or private facility that houses convicted persons who, without this regard to private facilities: the local government responsible for jail operations has contracted with a separate entity to replace that jurisdiction's jail operations.

Non-Discrimination Policy: The American Jail Association, Inc., through its administration of the Certified Jail Manager program, conforms in all respects to Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendment of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and the Americans with Disabilities Act of 1990; does not discriminate against any person on the basis of race, color, religion, national origin, sex, age, disability or sexual orientation in any of its policies, procedures, or practices.

CJM RECERTIFICATION APPLICATION FORM

PLEASE CHECK ONE

I choose to recertify by: ☐ Application/Professional Point System ☐ Re-Examination

TYPE OR PRINT CLEARLY

Date: _____

Name _____ AJA Membership #: _____

☐ RETIRED

Title _____

Agency _____

Agency Address _____

City _____ State _____ ZIP _____ - _____

Office Telephone Number (_____) _____ Fax (_____) _____

E-mail _____

Date of First Certification: ____/____/____ Rated Capacity of Facility: _____

Date of Last Recertification (if applicable): ____/____/____

.....
**ALL CORRESPONDENCE
WILL BE SENT TO YOUR HOME ADDRESS**

Current Home Address _____

City _____ State _____ ZIP _____ - _____

Home Phone () _____ E-mail _____

CURRENT JAIL MANAGEMENT POSITION

Required Documentation: Please attach an official current agency position description. *Organization charts are also requested but not required*

LIST YOUR CURRENT, OR MOST RECENT, JAIL MANAGEMENT POSITION:

Candidate: _____

Current Employing Agency: _____

Agency Address: _____

Current Position: _____

Rank (if applicable): _____ Dates: From: ____/____/____ To ____/____/____

Please indicate what facility, division, bureau, department, program, and/or shift you direct in your current position: _____

Please indicate how many jail staff you supervise: _____

Please check the paragraph below that describes your current agency.

- ☐ A county, municipal, tribal or regional facility that houses pretrial and sentenced inmates; and/or an institution that houses pretrial and sentenced inmates where the State is responsible for jail operations (Alaska, Hawaii, Rhode Island, Connecticut, Vermont, Delaware); and/or a private facility that houses pretrial and sentenced inmates and exists to serve the local jail needs of the community where it operates.
- ☐ A facility that houses ONLY pretrial detainees, regardless of what entity operates it. This includes, but is not limited to facilities that house persons for less than 72 hours (lock-ups), facilities that house Federal or military custody inmates awaiting trial (e.g. ICE, Marshals, Armed Forces), institutions where the State is responsible for the operations of jails, and private facilities.
- ☐ A local government or private facility that houses convicted persons who, without this facility's existence, would serve their sentence in the local jurisdiction's jail. With regard to private facilities: the local government responsible for jail operations has contracted with a separate entity to replace that jurisdiction's jail operations.
- ☐ Other: (Describe) _____

CURRENT JAIL MANAGEMENT PAID POSITION (Continued)

The following statement must be signed by the chief executive officer (sheriff, chief deputy, detention director, jail administrator, etc.) If the applicant is the chief executive officer, please sign your name below.

The information provided in the *Current Jail Management Paid Position* section of this CJM Application & Experiential Background Form (EBF) for candidate: _____
regarding his/her current position with _____ is, to the
best of my knowledge, truthful and accurate.

Chief Executive Officer's Signature

Title

Date

Chief Executive Officer's Printed Name

PREVIOUS JAIL MANAGEMENT POSITION

Previous Jail Management Paid Experience: List any previous positions held within the last four years.

Required Documentation: Please attach an official agency position description for your previous position.

Candidate: _____

Agency: _____

Address: _____

Previous Position: _____

Rank (if applicable): _____ Dates: From: ____/____/____ To ____/____/____

Please indicate what facility, division, bureau, department, program, and/or shift you directed in this position: _____

How many jail staff you supervised: _____

Please check the paragraph below that describes your previous agency

- ☐ A county, municipal, tribal or regional facility that houses pretrial and sentenced inmates; and/or an institution that houses pretrial and sentenced inmates where the State is responsible for jail operations (Alaska, Hawaii, Rhode Island, Connecticut, Vermont, Delaware); and/or a private facility that houses pretrial and sentenced inmates and exists to serve the local jail needs of the community where it operates.
- ☐ A facility that houses ONLY pretrial detainees, regardless of what entity operates it. This includes, but is not limited to facilities that house persons for less than 72 hours (lock-ups), facilities that house Federal or military custody inmates awaiting trial (e.g. ICE, Marshals, Armed Forces), institutions where the State is responsible for the operations of jails, and private facilities.
- ☐ A local government or private facility that houses convicted persons who, without this facility's existence, would serve their sentence in the local jurisdiction's jail. With regard to private facilities: the local government responsible for jail operations has contracted with a separate entity to replace that jurisdiction's jail operations.
- ☐ Other: (Describe) _____

PROMOTIONS

Promotions: List any promotions you have received since **your initial certification date, or your last recertification date**. Ten (10) points will be awarded for each promotion. Should a promotion of several ranks occur on one date, only 10 points will be awarded.

Required Documentation: Attach an official notice of promotion

Candidate: _____

Agency: _____

Promotion in rank: To: _____ From: _____

Date of Promotion: ____/____/____

_____ *Total Points*

Agency: _____

Promotion in rank: To: _____ From: _____

Date of Promotion: ____/____/____

_____ *Total Points*



If Recertifying by Exam---Stop here and turn to the **CJM Test Questions (Section 4)**

You will need to scan pages 1-5 of this application, all test questions with supporting documentation, and a copy of your current and previous job descriptions into **ONE pdf to be uploaded** online. Follow the instructions in the *AJA Certification Online Registration and Exam Instructions* guide found on the **aja.org** website.

If Recertifying by Points---Please continue.

EDUCATION AND TRAINING

Higher education attained at *regionally and nationally accredited, degree-granting* institutions only. To receive points, the name of the college or university must be given below. Points are awarded only for the highest level of education attained **since your last certification date**. Points are not cumulative.

Required Documentation: Attach an official original transcript

How points are awarded: If an Applicant received points for higher education on his/her original EBF, or previous Recertification Application, and completed a higher degree since that time, the Applicant will be awarded the point difference between the degrees. For example: If an Applicant previously received points for an associate's degree and has since earned a bachelor's degree, the applicant will be awarded 50 points on the *Recertification Application*, the difference between an associate's degree (50 points) and a bachelor's degree (100 points.)

Degree Earned: (per the original EBF or your last recertification application)

____ Associate's Degree = 50 pts Date earned: _____
 ____ Bachelor's Degree = 100 pts Date earned: _____
 ____ Master's Degree = 125 pts Date earned: _____
 ____ Doctorate Degree = 150 pts Date earned: _____

Degree Earned Since Last Certification: (within the past 4 years)

____ Associate's Degree = 50 pts Date earned: _____
 ____ Bachelor's Degree = 100 pts Date earned: _____
 ____ Master's Degree = 125 pts Date earned: _____
 ____ Doctorate Degree = 150 pts Date earned: _____

Points Earned: _____

To calculate points, subtract the points previously awarded on your original EBF, or last recertification from points earned within the past 4 years. Indicate the point difference in Points Earned space.

Institution's Name: _____

Address/City/State: _____

Phone Number of Institution: _____

Major(s): _____

If work toward a bachelor's degree resulted in the accumulation of credit hours equal to that of an associate's degree (64 credits), but no degree has been attained, state number of credit hours completed _____. You will receive 50 points for associate's degree equivalent.

MANAGEMENT-BASED EDUCATION / TRAINING

DO NOT INCLUDE college courses where credits were applied toward a degree

Jail management, criminal justice management, and general management education/training: (training programs, seminars, conferences, related specifically to management). **DO NOT INCLUDE** courses designed for front line officers.

National Jail Leadership Command Academy (NJLCA) completion = 80 Points.

Required Documentation: Preferred documentation is a copy of your training roster from your agency with the course name, date and course points highlighted. You may also submit a certificate or the class agenda/roster with a description of the course if you do not have an agency training roster for verification.

Please list all activities in chronological order beginning with the most recent over the past four years since your last certification date.

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____/____/____ to: ____/____/____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

____ Total points

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____/____/____ to: ____/____/____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

____ Total points

Section 2

MANAGEMENT-BASED EDUCATION / TRAINING

(continued)

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____/____/____ to: ____/____/____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

____ *Total points*

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____/____/____ to: ____/____/____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

____ *Total points*

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____/____/____ to: ____/____/____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

____ *Total points*

MANAGEMENT-BASED EDUCATION / TRAINING

(continued)

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____/____/____ to: ____/____/____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

____ *Total points*

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____/____/____ to: ____/____/____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

____ *Total points*

Organization conducting event: _____

Title of training event: _____

Subject matter addressed: _____

Dates: From: ____/____/____ to: ____/____/____

of full days attended ____ x 8 pts = ____ # of half days attended ____ x 4 pts = ____

____ *Total points*

(Make extra copies of any form if necessary)

ONLINE LEARNING

Maximum allowable for Online Learning: 120 points
One point will be awarded per hour of management-based training.

Management-based courses taken *online* or by *correspondence* where the subject matter is relevant to your position as a jail manager since last certification. One point per hour of instruction will be awarded for management-based courses offered by the **National Institute of Corrections (NIC)**, the **American Correctional Association (ACA)** and the **American Jail Association (AJA)**. Other management-based online coursework will be evaluated on a case-by-case basis.

DO NOT INCLUDE courses related to basic correctional practice such as those written for front-line officers.

Required Documentation: Attach a course description outlining the learning objectives and course hours along with documentation of completion.

Title of course: _____

Type of course: ☐ Online ☐ Correspondence

Agency providing training: ☐ NIC ☐ ACA ☐ AJA ☐ other: _____

Date of completion: ____/____/____ Course hours: ____ x 1 = ____

____ Total points

Title of course: _____

Type of course: ☐ Online ☐ Correspondence

Agency providing training: ☐ NIC ☐ ACA ☐ AJA ☐ Other: _____

Date of completion: ____/____/____ Course hours: ____ x 1 = ____

____ Total points

(Make extra copies of any form if necessary)

MENTORSHIP

*Maximum allowable for Mentorship: **40 points***

A Certified Jail Manager may apply for recertification points by serving as a mentor for an individual interested in becoming a Certified Jail Manager, Certified Jail Supervisor, or Certified Jail Officer.

To Qualify:

A CJM must mentor an individual by making them aware of the AJA certification programs by educating them about the application process; assisting them with the completion of the Experiential Background Form; providing support in preparation for the certification exam; and providing advice in reference to activities that will further their career and aid in Recertification.

For recertification, a Certified Jail Manager will receive:

20 points for each mentored individual that makes application and takes the CJM examination.

15 points for each mentored individual that makes application and takes the CJS examination.

10 points for each mentored individual that makes application and takes the CJO examination.

***The applicant must indicate you are mentoring them on their application form.**

Applicant Mentored: _____

Agency: _____

CJM Application Date: _____ CJM Examination Date: _____

CJS Application Date: _____ CJS Examination Date: _____

CJO Application Date: _____ CJO Examination Date: _____

Applicant Mentored: _____

Agency: _____

CJM Application Date: _____ CJM Examination Date: _____

CJS Application Date: _____ CJS Examination Date: _____

CJO Application Date: _____ CJO Examination Date: _____

_____ *Points Awarded for this Section.*

LEADERSHIP ACTIVITIES

20 points are required anywhere in Section 3 and achieved after your last certification date.

Points awarded for Volunteer LEADERSHIP positions held on *jail management / criminal justice* oriented boards, committees, task forces, and commissions ***OUTSIDE*** of your employing agency **since last certification**. Points awarded for completed years only. If a committee or task force assignment has duration of less than one year, but more than 3 months, it qualifies for one year of service.

Board / Commission: A Board/Commission is a policy setting body.

Committee / Task Force: A Committee or Task Force is assigned a task from another body.

Organization: _____

Office or position held: _____

Name of Board/ Commission / Committee/ Task Force: _____

Goals and purposes of the Board/Commission/Committee/Task Force listed: _____

Dates of Service: From: _____/_____/_____ To: _____/_____/_____

of years _____ Board/Commission Officer: x 25 points = _____

of years _____ Board/Commission Member: x 20 points = _____

of years _____ Committee Chair/Task Force Leader x 15 points = _____

of years _____ Committee Member/Task Force Member x 10 points = _____

_____ *Total points*

Organization: _____

Office or position held: _____

Name of Board/ Commission / Committee/ Task Force: _____

Goals and purposes of the Board/Commission/Committee/Task Force listed: _____

Dates of Service: From: _____/_____/_____ To: _____/_____/_____

of years _____ Board/Commission Officer: x 25 points = _____

of years _____ Board/Commission Member: x 20 points = _____

of years _____ Committee Chair/Task Force Leader x 15 points = _____

of years _____ Committee Member/Task Force Member x 10 points = _____

_____ *Total points*

SCHEDULED SPEAKER OR INSTRUCTOR

Maximum allowable Speaker points: 200 points

Scheduled Speaker or Instructor for the purpose of teaching subjects *specifically* related to *jail management* issues to corrections personnel, governmental officials, or criminal justice students. College courses taught is 50 points per class. All other classes are 3 points per hour. **You may include regional or multi- jurisdictional training hosted by your organization.**

DO NOT INCLUDE presentations made only to the staff of your employing organization or practical training or courses relating to basic correctional practice, such as those written for front-line officers.

Organization conducting event: _____

Jail management related subject discussed: _____

Audience in attendance: _____

Location of event: _____

Dates of service: From: _____/_____/_____ To: _____/_____/_____

of hours _____ x 3 points = _____

_____ Total *points*

Organization conducting event: _____

Jail management related subject discussed: _____

Audience in attendance: _____

Location of event: _____

Dates of service: From: _____/_____/_____ To: _____/_____/_____

of hours _____ x 3 points = _____

_____ Total *points*

TECHNICAL ASSISTANCE CONSULTANT

Participation as a ***technical assistance*** consultant in an advisory (paying or nonpaying) capacity on jail operations/management issues (other than your employing agency).

National Jail Leadership Command Academy (NJLCA) Mentors can claim 40 hours of credit in this section.

Agency that contracted your services: _____

Agency address: _____

Agency phone: _____

Date(s) of service: From: ____/____/____ to: ____/____/____

Nature of service performed: _____

Contact Person: _____ Phone: _____

of full days _____ x 8 pts = _____ # of half days _____ x 4 pts = _____

_____ *Total points*

Agency that contracted your services: _____

Agency address: _____

Agency phone: _____

Date(s) of service: From: ____/____/____ to: ____/____/____

Nature of service performed: _____

Contact Person: _____ Phone: _____

of full days _____ x 8 pts = _____ # of half days _____ x 4 pts = _____

_____ *Total points*

AUDITS

A MAXIMUM OF 16 points will be awarded per audit (No more than three audits accepted).

Agency that contracted your services: _____

Agency address: _____

Agency phone: _____

Date(s) of service: From: _____/_____/_____ to: _____/_____/_____

Nature of service performed: _____

Contact Person: _____ Phone: _____

of full days _____ x 8 pts = _____ # of half days _____ x 4 pts = _____

_____ *Total points*

Agency that contracted your services: _____

Agency address: _____

Agency phone: _____

Date(s) of service: From: _____/_____/_____ to: _____/_____/_____

Nature of service performed: _____

Contact Person: _____ Phone: _____

of full days _____ x 8 pts = _____ # of half days _____ x 4 pts = _____

_____ *Total points*

(Make extra copies of this form if necessary)

WORK PUBLISHED OUTSIDE OF YOUR EMPLOYING AGENCY

Articles, bulletins, chapters, books, written and published on jail management /criminal justice related subjects (**excluding your employing agency's publications**) **since last certification.** Include articles published in AJA's magazine, *AMERICAN JAILS*, and other similar publications. To be eligible for points, the article must be management-based and relevant to the role of the jail manager, and a copy must accompany your application.

Required Documentation: Attach a copy of the work written and published.

Title of the jail management / criminal justice related work written and published:

Name of the publication (journal, book, magazine, etc.)_____

Name of publisher (organization/agency):_____

Date of publication: ____/____/____

Check one:

- ☐ **Book**, Jail Management or Criminal Justice based = 50 pts
- ☐ **Chapter** in a Jail Management or Criminal Justice Book = 25 pts
- ☐ **Magazine Article/Bulletin**, Jail Management or Criminal Justice based = 20 pts

_____ Total *points*

(Make extra copies of this form if necessary)

NATIONAL CERTIFICATIONS

National certifications obtained related to jail management, criminal justice management, and public management. Points will be allowed for certifications obtained where the emphasis of the certification relates *specifically to jail management, criminal justice management, or public management* **since last certification.**

Required Documentation: Attach a copy of the official notification of certification on the sponsoring organization's letterhead.

Points for certifications will be allowed for:

CCT	Certified Correctional Trainer, AJA/IACTP: 15 points
CJO	Certified Jail Officer: AJA: 10 points
CJM	Certified Jail Manager, AJA: 15 points
	PREA Auditor, AJA: 10 points
CCS	Certified Correctional Supervisor, ACA: 5 points
CCM	Certified Correctional Manager, ACA: 10 points
CCE	Certified Correctional Executive, ACA: 15 points
CPM	Certified Public Manager, CPM: 20 points
CCHP	Certified Correctional Health Professional, NCCHC: 10 points
CFP	Certified Correctional Food Service Professional, ACFSA: 10 points
	ACA Auditor, ACA: 20 points

Other **national** certifications obtained related to jail management, criminal justice management, and public management will be evaluated on a case-by-case basis. In order for the JMCC to evaluate other national certifications detailed information regarding the eligibility requirements for the certification must accompany this application. Certification should be sponsored by a **national organization**. DO NOT include basic jail/corrections certifications.

Certification: _____

Organization sponsoring certification: _____

Address of sponsoring organization: _____

Phone number of sponsoring organization: _____

Date of Certification: ____/____/____ Date of Expiration: ____/____/____

_____ *Total points*

AWARDS

Awards presented to you by a national, state/regional, or community organization as a result of some action or activity performed by you during the course of your service as a paid jail manager **since last certification**.

Required Documentation: Attach a copy of the letter/announcement acknowledging your accomplishment and the reason you were awarded. **DO NOT INCLUDE** listings such as Who's Who, certificates of appreciation, letters of commendation or awards from your employing agency.

Name/type of award _____

Name of organization/agency presenting award: _____

Address of organization/agency: _____

Brief description of why you were presented this award: _____

Date award was presented: ____/____/____

This award was presented by: (check only one)

- ☐ National Organization/Agency = 20 pts
- ☐ State or Regional Organization/Agency = 15 pts
- ☐ Community Organization/Agency = 10 pts

_____ Total *points*

COMMUNITY-BASED VOLUNTEER LEADERSHIP ROLES

Maximum allowable: 40 points

Community-based Volunteer Leadership Service roles performed in the community outside of your role as a paid jail manager. Eligible listings would include participation in a leadership capacity (non-paid) in business, professional, technical, community service organizations, management organizations, and other community-service oriented organizations including roles related to advisory or other service on government agencies, boards, commissions and involvement in the political process.

To be awarded points, a detailed description of the purpose of the organization and your specific leadership role in organization must be provided. *Do not duplicate information given elsewhere.* Points are awarded for *completed* years only **since last certification.**

Examples of community-based service organizations include: Community Action Council, Republic/Democratic National Committee, Lions Club, Red Cross, Junior Achievement, Fire & Rescue Service, Rotary Club, Boys & Girls Club, American Cancer Society, etc. **Do not include** participation in youth sports or religious affiliations.

Organization: _____

Mission (purpose) of the Organization: _____

Organization's Address: _____

Contact person & phone number: _____

Leadership role performed: (i.e. spokesperson, chairperson etc.): _____

Describe in detail the nature of the leadership service you performed:

Dates of service: From: ____/____/____ To: ____/____/____

of years _____ x 10 points = _____ (Points will be awarded for completed years only.)

_____ Total points

MEMBERSHIPS

*Maximum allowable for Memberships: **40 points***

Membership in state, regional, or national jail/corrections associations - such as the, American Jail Association, American Correctional Association, National Sheriffs' Association, Bay Area Jail Managers Association, South Carolina Jail Administrators' Association, etc.

Do not list law enforcement associations (such as FOP, NABCJ, etc.) or local county/agency labor oriented associations/organizations. Provide complete dates. You will be awarded **5 points per year** of membership. Points awarded for FULL years only **since last certification**.

Name of Association: _____

Address of Association: _____

Dates of Membership: From: ____/____/____ to: ____/____/____

Please indicate the type of **JAIL** or **CORRECTIONS** Association:

☐ State Association ☐ Regional Association ☐ National Association

_____ Years x 5 pt = _____ points

_____ Total points for membership in this jail/corrections related association

Name of Association: _____

Address of Association: _____

Dates of Membership: From: ____/____/____ to: ____/____/____

Please indicate the type of **JAIL** or **CORRECTIONS** Association:

☐ State Association ☐ Regional Association ☐ National Association

_____ years x 5 pt = _____ points

_____ Total points for membership in this jail/corrections related association

(Make copies of any form if necessary)

CJM TEST QUESTION SUBMISSIONS

Required Documentation: All recertifying applicants must include a minimum of three potential test questions for the Certified Jail Manager examination.

A maximum of 20 points will be allowed on the Recertification Application for potential test questions submitted for the Jail Manager Certification examination.

Potential test questions must:

- be applicable to *adult* local corrections in general, and
- not be state or jurisdictional specific,
- be management-based,
- not include “all of the above” or “none of the above” as an answer,
- not be “not” questions (example: Which of the following is not)
- not be taken from the ACA Standards Manual,
- be submitted on the ***Item Submission Sheet*** enclosed in this application -
(one question per form), please make additional copies of the form as necessary.
- **a copy of the reference must be submitted with the application.**

Major Content Areas for Questions on the CJM Examination

- I. Environment/Equipment/Technology
- II. Legal/Safety/Security
- III. Professional Issues
- IV. Communications
- V. Management
- VI. Special Populations
- VII. Support Services

PLEASE NOTE: We will NOT accept any questions coming from the JOB or JMB bulletins. AJA needs more questions in the areas below:

I: Management

B. Labor Relations

D. Stress Management

E. Mediation and Negotiations

F. Standards

H. Vendor Contracts/RFPs

I. Facility Sanitation

II: Legal/Safety/Security

C. Confidentiality

J. Crowding

III: Professional Issues

A. Ethics

C. Voluntary Standards

IV: Communications

A. Public Relations

B. Community Relations

C. Communication Barriers

V: Environment/Equipment/Technology

A. Restraints

B. Furniture/Ergonomics

C. Computers

D. ID, Tracking, Documentation

G. Safety Equipment

VI: Special Populations

B. Juveniles

C. Females

D. Substance Abusers- Medication Assisted Treatment

E. Mental Health

K. LGBTQI+

VII: Support Services

A. Transportation

E. Laundry

F. Waste Management

Submissions:

Date questions were submitted to the JMCC: ____/____/____

of questions ____ x 2 points = ____

ITEM SUBMISSION SHEET

Please state your question in **multiple choice** format and provide ONE CORRECT answer and THREE plausible but INCORRECT options. Please do not use “all of the above” or “none of the above” options. You may also create a situation which has more than one question accompanying it.

If your question includes a diagram or illustration, please clip it to the reverse side. It must be camera-ready, not a “copy of a copy,” and it must not be copyright protected.

Please refer to the enclosed *Item Developers Guide* (or print a copy from the AJA website, www.aja.org) for assistance in writing test items. Please make additional copies of this form as necessary.

Attach a copy of reference and/or source for each question.
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QUESTION:

1. CORRECT ANSWER

2. INCORRECT OPTION

3. INCORRECT OPTION

4. INCORRECT OPTION

For which test is the question submitted? **JAIL MANAGER CERTIFICATION EXAM**

Reference your question (copy attached): _____

Major Content Area (see enclosed list): _____

Your Name: _____

(Make extra copies of any form if necessary)

Biography: Please tell us a little bit about yourself, and why certification is important to you.

Does AJA have permission to use your bio in our social media, AJAlert and magazine?

Please check: Yes No

RECERTIFICATION SUMMARY OF POINTS

350 points required

TOTAL POINTS: _____

Before you put your application and supporting documents in the mail, be sure to make a copy of them for your files. You may need to refer to them should the Commission contact you with any questions.

The JMCC will accept Recertification Applications as early as six months prior to the Applicant's certification expiration date. Applicants are encouraged to submit applications early to avoid potential problems that may occur. You will be notified of the status of your application within six weeks from the time we receive it along with all required supporting documentation including fees. Incomplete applications will be sent back to the applicant and the evaluation process will not commence until all required materials and information have been received by the JMCC.

RECERTIFICATION DEADLINES- **Professional Points (only)**

Applications must be **postmarked at least 6 weeks prior** to your certification expiration date. Recertification applications received after the six week due date will be assessed an additional \$75 late fee. If the application is postmarked after the CJM's expiration date, to become certified again, the individual will have to reapply for certification and take the CJM examination.

I do hereby certify that my biographical statement, as submitted to the JMCC in connection with my application for recertification, is true and correct in all material respects. I authorize the JMCC to take whatever reasonable steps may be necessary to verify and confirm the accuracy of the information contained herein. If an audit is conducted, or my application is incomplete or is received without payment, or the JMCC determines that I do not have the required number of points or that I have not met other criteria required for eligibility: I understand that the delay this would create in further processing my application could result in missing the recertification application deadline.

The JMCC reserves the right to enact changes in the recertification requirements at any time.

I agree to be bound by the Code of Ethics of AJA and understand that any material misrepresentation of the information provided on the CJM Recertification Application may result in denial or loss of the CJM designation. I acknowledge that I have read and understand the CJM Handbook for Candidates.

The undersigned hereby agrees to indemnify and hold harmless the American Jail Association, Inc., its officers, directors, employees and agents from any or all liability, loss or damage whatsoever that may result from a denial of my application for recertification as a Certified Jail Manager.

Signature

Date

RECERTIFICATION BY POINTS PAYMENT FORM

CJM RECERTIFICATION APPLICATION

FEES

Please submit the *CJM Recertification Application* along with the nonrefundable application fee *AND* all required supporting documentation. Fees are subject to change.

You will be notified of the status of your recertification within six weeks from the time the JMCC receives your completed application.

NOTE: AJA accepts payment from Navy COOL for military corrections personnel

METHOD OF PAYMENT

Candidate name: _____

Name of Cardholder: _____

Signature of Cardholder: _____

☐ VISA Card ☐ MasterCard ☐ American Express

Credit Card Number: _____

Expiration Date: _____

Billing Address ZIP Code: _____

Security#: _____ (Visa/MasterCard- three digit # found on the signature panel)
(American Express- four digit # found on front of card)

Amount of Payment: \$ _____ ☐ Member Fee (\$150) ☐ Nonmember Fee (\$210)
☐ Recertification by Exam Fee (\$300)

☐ Payment includes an additional late submission processing fee

☐ Check Enclosed # _____

☐ P.O. Form Enclosed # _____

Send payment and all required materials to:

CJM Program
C/o American Jail Association
1135 Professional Court, Hagerstown, Maryland 21740, Phone: 301-857-2323

CJM RECERTIFICATION APPLICATION CHECK LIST

Be sure to include:

- [] An official agency **Position Description** for all jail management positions listed on the application.
- [] The completion of at least **40 points** in the **Management-Based Education and Training** Section and **20 points** under **Leadership Activities (Mandatory)**
- [] **CJM Examination Questions:** three Jail Manager Certification examination questions must accompany your application. (**Mandatory**)
- [] **Application fee.**
- [] **Signature** on the application.
- [] **Postmark Date:** application postmark is at least **six** weeks prior to certification expiration date (see the Recertification Deadline section of the ***Handbook for Candidates***).
- [] All **Required Documentation** as noted on the appropriate page.

AMERICAN JAIL ASSOCIATION

CODE OF ETHICS FOR JAIL OFFICERS

As an officer employed in a detention/correctional capacity, I swear (or affirm) to be a good citizen and a credit to my community, state, and nation at all times. I will abstain from questionable behavior which might bring disrepute to the agency for which I work, my family, my community, and my associates. My lifestyle will be above and beyond reproach and I will constantly strive to set an example of a professional who performs his/her duties according to the laws of our country, state, and community and the policies, procedures, written and verbal orders, and regulations of the agency for which I work.

On the job I promise to:

KEEP	The institution secure so as to safeguard my community and the lives of the staff, inmates, and visitors on the premises.
WORK	With each individual firmly and fairly without regard to rank, status, or condition.
MAINTAIN	A positive demeanor when confronted with stressful situations of scorn, ridicule, danger, and/or chaos.
REPORT	Either in writing or by word of mouth to the proper authorities those things which should be reported, and keep silent about matters which are to remain confidential according to the laws and rules of the agency and government.
MANAGE	And supervise the inmates in an evenhanded and courteous manner.
REFRAIN	At all times from becoming personally involved in the lives of the inmates and their families.
TREAT	All visitors to the jail with politeness and respect and do my utmost to ensure that they observe the jail regulations.
TAKE	Advantage of all education and training opportunities designed to assist me to become a more competent officer.
COMMUNICATE	With people in or outside of the jail, whether by phone, written word, or word of mouth, in such a way so as not to reflect in a negative manner upon my agency.
CONTRIBUTE	To a jail environment which will keep the inmate involved in activities designed to improve his/her attitude and character.
SUPPORT	All activities of a professional nature through membership and participation that will continue to elevate the status of those who operate our nation's jails. Do my best through word and deed to present an image to the public at large of a jail professional, committed to progress for an improved and enlightened criminal justice system.

The American Jail Association's Board of Directors has approved the AJA Code of Ethics as part of an integral program to achieve a high standard of professional conduct among those officers employed in our Nation's jails. Adopted by the AJA Board of Directors on November 10, 1991. Revised 10/17/2011.