



CTP

Application

This form may be completed by typing directly into the body of the PDF document. Please submit your completed application, along with the \$295 application fee and a copy of your diploma/transcripts to:

Turnaround Management Association, 150 North Wacker Drive, Suite 1900, Chicago, Illinois 60606
p: +1 312 578 6900, f: +1 312 578 8336, e: certification@turnaround.org

PERSONAL INFORMATION

First Name	Middle Name	Last Name	Suffix
Date of Birth		Business	
Title			
Business Address		City	State Zip
Business Telephone		Business Fax	
Home Address		City	State Zip
Email		Preferred Method of Contact	
Contact information (if not provided above)			

REQUIREMENTS

I hereby apply for certification as a Certified Turnaround Professional and understand that my certification depends on my ability to meet all the requirements and qualifications and is subject to the approval of the Standards Subcommittee. I certify that the information contained in this application is true and correct. I further understand that if any information is later determined to be false, TMA reserves the right to revoke any certification that has been granted on the basis thereof.

Indicate your understanding of and agreement to comply with the following by checking the boxes that precede each statement:

- ☐ In making and filing this application for certification, I authorize all persons, firms and entities to furnish any relevant information that may be requested by the Turnaround Management Association in connection with the investigation of this application.
- ☐ I release and indemnify the Turnaround Management Association and its Board of Directors, officers and employees from any and all liability arising from the investigation and evaluation of this application, decisions relative to the granting of certification, continuing professional education requirements and standards of practice.
- ☐ I have never had a professional license or certification suspended or revoked.
- ☐ I acknowledge that all other sections, paragraphs and parts of this application are incorporated herein without specific reference.
- ☐ I have read and agree to comply with the Code of Ethics. Available Here
- ☐ I have read and agree to abide by the Rule and Regulations of the CTP and CTA Certification Programs. Available Here
- ☐ I am not under any SEC or criminal investigation by any government or regulatory authority, nor any other investigation or proceeding pending with any professional or certification entity. I understand if I am, I must fully disclose this and all details on a separate document.
- ☐ I have not been convicted of a felony.

By providing my handwritten or electronic signature dated below, I indicate my understanding of and agreement to comply with the terms of this application.

Applicant Signature	Date
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PAYMENT

This signed form must be mailed, faxed, or emailed with payment.

☐ Check number: _____ (payable in U.S. funds to Turnaround Management Association)

Credit Card

☐ Visa

☐ MasterCard

☐ American Express

Name on Card

Credit Card Number

Expiration Date

Security Code

TURNAROUND WORK HISTORY

Please indicate the experience level you meet:

☐ 4 – 11 Years Turnaround Experience

☐ Twelve+ Years Turnaround Experience

Qualifying experience would be defined as the following roles: CRO or equivalent, Assignee for the Benefit of Creditors, Turnaround Team Leader, Plan Administrator or Liquidating Trustee, Receiver, Interim Manager Working on Turnaround.

CURRENT EMPLOYER

Start Date

End Date

Company

Title

City

State

Job Description

PREVIOUS EMPLOYER

Start Date

End Date

Company

Title

City

State

Job Description

PREVIOUS EMPLOYER

Start Date

End Date

Company

Title

City

State

Job Description

PREVIOUS EMPLOYER

Start Date

End Date

Company

Title

City

State

Job Description

PREVIOUS EMPLOYER

Start Date	End Date	Company	Title
City		State	
Job Description			

PREVIOUS EMPLOYER

Start Date	End Date	Company	Title
City		State	
Job Description			

ADDITIONAL QUALIFICATIONS

Individuals who hold the CIRA designation offered through AIRA are exempt from the accounting and finance examination and those who have earned their Juris Doctorate and have passed a state's bar may waive the law examination. If you intend to waive either section, please check the box below and provide proof with your application.

☐ CIRA ☐ Juris Doctorate