



Certified Hotel Administrator (CHA®)



REGISTRATION FORM

APPLICATION CHECK LIST

Have you included the following required documents?

- Completed CHA application form
- Current Resume
- Employment verification Form (signed by your immediate supervisor)
- Payment
- Copy of Diploma or transcripts/AHLEI Certification

SECTION 1

You may apply for certification under one of two different plans. Check the plan that applies to you and be sure to read each eligibility requirement carefully. You must satisfy all requirements to be accepted under the plan you select.

Candidate time in position : **2 - years.** OR

- One current AHLEI department head certification takes 1-year off requirement (limit 1)
- Degree from accredited academic institution will take 1-year off requirement (limit 1)

Qualifying position(s): *General Manager, Owner/Operator * in a lodging hospitality company, or corporate executive at a holding hospitality company responsible for the operation of two or more properties. Assistant General Manager or Director of Operations/rooms division (after successfully completing CRDE).*

** non-proprietary documentation that substitutes ownership of at least one hotel/lodging property.*

SECTION 2

PERSONAL AND PROFESSIONAL DATA

Print Name (Mr./Mrs./Ms.) :		Birth Date :	FOR OFFICE USE ONLY	
Home Mailing Address :			Customer#	
City/State/Province :		Postal Code :	Payment	
Business Phone :	Home Phone :		Order #	Enrollment Date
Business Fax :	E-mail :			
Present Position :		starting month/year :	Supervisor's name	
Company Property :				
Mailing Address :			Supervisor's Phone	
City/State/Province :		Postal Code :		
Property affiliation (chains, Referral groups, management companies; includes brochures if possible)			Property/Company Size	

SECTION 3 - FEES/PAYMENT

The CHA certification program fee is US\$ 1125 (*One Thousand one hundred and twenty five*), invoice will be sent to you or your organization, once your eligibility is approved by AHLEI

This fee includes:

- Exam Preparation Booklet including a resource materials for the Certified Hotel Administrator program.
 - Application and Exam Fee.
 - Certificate, Lapel Pin and the CHA Designation for candidates who successfully pass the certification exam.
 - Four (4) full days coached review session by qualified instructor
- Simulation of examinations questions

SECTION 4 - THE CHA EXAMINATION

If you plan to take your exam at a review session, please provide the location and date below. Note that there may be a fee to attend and that these programs may be cancelled due to low enrollment.

REVIEW SESSION REGISTRATION	
	Review Class :
	Date of Exam :

PROCTOR INFORMATION	
Name : Mr. Wiwin Suyasa	Title : CHE, CHA
Organization : American Hotel & Lodging Educational Institute 800 N. Magnolia Ave., Suite 300, Orlando, FL 32803	

SECTION 5 - CERTIFICATION AGREEMENT

Please read the following Certification Agreement and sign and date it at the bottom. We **must** have your signature below to process your application.

The information I have provided is accurate. I understand that acceptance into the CHA program is based on this application, any support materials I have enclosed, and a favorable recommendation from my reference. I give the Educational Institute permission to thoroughly investigate my past employment, education, and professional development activities. I release from liability all persons and companies supplying such information. I indemnify all persons I have listed in this application against any liability which might result from such an investigation. If I am accepted as a CHA candidate, I will have six months to complete **all** program requirements. If I do not complete the program within six months I will have to re-apply and submit all fees. I agree to hold the Educational Institute and its Certification Commission harmless from any and all liability in the event this application is rejected on the basis of the information furnished by me or third persons which would, in the judgment of the Educational Institute, make me ineligible for certification. I agree to accept the Certification Commission's decision as to my eligibility for this certification.

The CHA program and fees associated with the program are non-refundable and non-transferable.

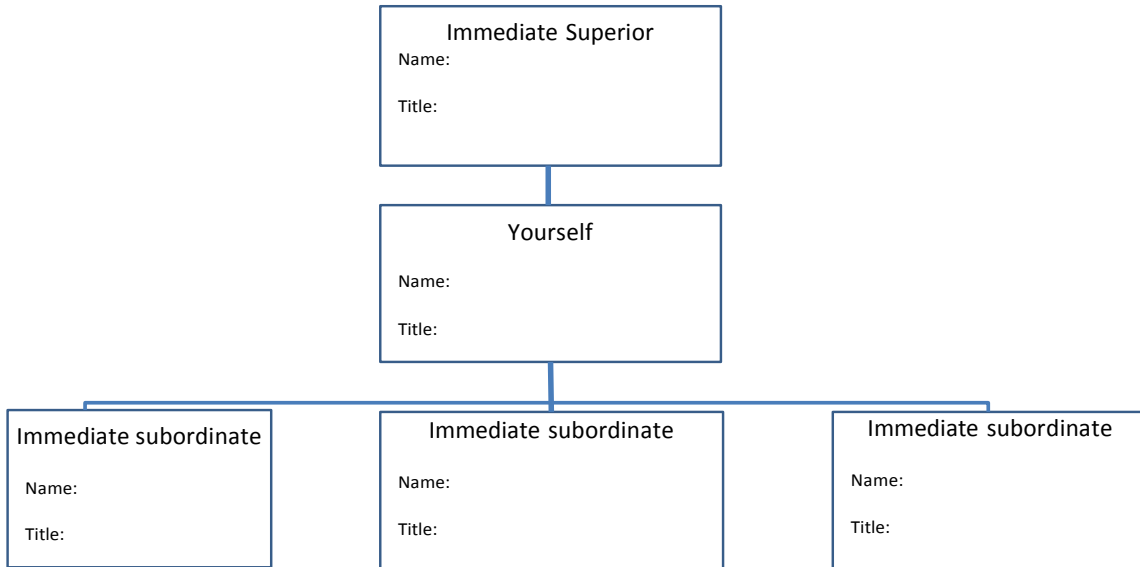
Signature :

Date:

Print Name:

Organizational Chart and Resume*

*Please note that you can use [this sample](#) document as the Organizational Chart and Resume requirements



Current Title :
Start Date :
Property:
Location (city, State or Province, Country):
Job Description:

Previous Title :
Start Date :
Property:
Location (city, State or Province, Country):
Job Description:

Previous Title :
Start Date :
Property:
Location (city, State or Province, Country):
Job Description:



Certified Hotel Administrator (CHA®) EMPLOYMENT VERIFICATION FORM



PLEASE TYPE OR PRINT CLEARLY - FILL OUT COMPLETELY

The Certified Hotel Administrator (CHA) designation recognizes those individuals who have demonstrated exemplary leadership and managerial abilities in a hospitality setting. Those who earn the CHA are seen as highly competent, respected professionals who are knowledgeable in their positions.

Please complete the information below on behalf of the individual applying for certification. Acceptance into the CHA program is contingent on verification of employment. The applicant has been directed to give this form to an immediate supervisor or corporate representative.

This information will be subject to verification through the corporate office.

(Note: EI's Certification Department will not accept verification statements from a relative or person with the same last name.)

I verify that (name) :	
has been employed with (company/property) :	
in the position of :	
for the period of (month/year) :	trough (month/year) :
His/her responsibility include:	
Additional comment :	

Based on the applicant's experience and competence:

I attest that the above information is true and understand that any misinformation provided will affect the candidacy of stated CHA applicant. I recommend this individual for the CHA program and verify that the candidate currently holds a qualifying position as general manager, owner/operator, or corporate executive. I will, if called upon, answer any questions regarding the employment of the stated CHA applicant.

I do not recommend this person for acceptance as a CHA candidate.

Signature :		Date :
Your Name (Mr./ Mrs) :		
Title :	Property :	
Address :	City :	
	State/Province :	
State/Province :	Country :	ZIP :
Business Telephone :	Fax :	Email :