## Certified Marina Manager Application Form

Refer to page 6 of the Certified Marina Manager Handbook for a detailed explanation of how to fill out this application form.

## 1. Biographical Information

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| --- |
| Biographical Information  |
| *Full Name* |  |
| *Organisation Name* |  |
| *Job Title* |  |
| *Personal email address* |  |
| *Personal mobile number* |  |
| *Business email address* |  |
| *Business mobile number* |  |
| *Business address* |  |

## 2. Employment History

List the names and addresses of the Marinas and or organisations that you have been employed at in the last 10 years, most recent first.

|  |
| --- |
| Employment History  |
| *Organisation Name* |  |
| *Position held* |  |
| *Date employment commenced* |  |
| *Date employment ended*  |  |
| *Total length of employment*  |  |
| *Name of Line Manager* |  |
| *Marina address*  |  |

|  |
| --- |
| Employment History  |
| *Organisation Name* |  |
| *Position held* |  |
| *Date employment commenced* |  |
| *Date employment ended*  |  |
| *Total length of employment*  |  |
| *Name of Line Manager* |  |
| *Marina address*  |  |

|  |
| --- |
| Employment History  |
| *Organisation Name* |  |
| *Position held* |  |
| *Date employment commenced* |  |
| *Date employment ended*  |  |
| *Total length of employment*  |  |
| *Name of Line Manager* |  |
| *Marina address*  |  |

|  |
| --- |
| Employment History  |
| *Organisation Name* |  |
| *Position held* |  |
| *Date employment commenced* |  |
| *Date employment ended*  |  |
| *Total length of employment*  |  |
| *Name of Line Manager* |  |
| *Marina address*  |  |

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| --- |
| Employment History  |
| *Organisation Name* |  |
| *Position held* |  |
| *Date employment commenced* |  |
| *Date employment ended*  |  |
| *Total length of employment*  |  |
| *Name of Line Manager* |  |
| *Marina address*  |  |

## 3. Marina Association Membership

As a CMM applicant, you will be required to be an active member of your local or regional marina association, such as the Marina Industries Association, British Marine or TYHA. This membership can be through your employer, or if your employer is not a member you can obtain an individual membership. Individual memberships with be evaluated on a case-by-case basis.

|  |
| --- |
| Marina Association Membership  |
| *Association Name* |  |
| *Association Contact* |  |

You may also wish to mention other civic and professional organisations you are involved in e.g. Superyacht Australia or The Coast Guard.

|  |
| --- |
| Other Association Membership  |
| *Association Name* |  |
| *Association Contact* |  |
| *Office held (if applicable)* |  |
| *Committee served on (if applicable)*  |  |
| *Were you involved in any local community marine projects?*  |  |

## 4. Education, training and professional development

Ensure a copy of your Advanced Marina Management Certificate is attached to your final application submission. You are **not** required to attach any other evidence of education, training and professional development including evidence of completion of the IMM course.

|  |
| --- |
| Education, training and professional development  |
| *List any college, university or professional qualifications you have achieved in your career.*  |  |

|  |
| --- |
| Intermediate Marina Management Course  |
| *Course Date attended*  |  |
| *Course Location*  |  |

|  |
| --- |
| Advanced Marina Management Course  |
| *Course Date attended*  |  |
| *Course Location*  |  |
| *Certificate attached to submission* |  |

List any marina/job related courses that you attended over the last five years

|  |
| --- |
| Professional Development  |
| *Course Date attended*  | *Course Location* | *Course description*  |
|  |  |  |
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## 5. References

Four letters of recommendation are required and must be submitted with the application.

|  |
| --- |
| Letters of recommendation  |
| *Reference No.*  | *Reference Type* | *Referee Name* | *Referee Email Address* |
| *1* | Active Certified Member  |  |  |
| *2* | Past or Present Employee |  |  |
| *3* | Business Associate  |  |  |
| *4* | Business Associate  |  |  |

## 6. Other information

This information will be treated confidentially. If you answer yes to any of these, you must provide a written explanation on a separatee document and attach to your application.

|  |
| --- |
| Other Information |
|  | *Yes* | *No* |
| *Have you ever been involved in a reorganisation for the benefit of creditors, or in a bankruptcy as a debtor?*   |  |  |
| *Have you ever been involved in either civil or criminal legal proceedings as a defendant in which there were allegations of fraud, misrepresentation, miss appropriation of finds or property, etc.*  |  |  |
| *Have you ever been subject to disciplinary action by another professional organisation?*   |  |  |

## 7. Experience Credit Form - Part one - Portfolio Information

**Instructions:** Indicate your management experience in each area below, beginning with column 1 list your most recent experience. The dates at the top of the columns should represent each marina job and relate to the employment history provided in the “employment history” section of this application form. Attach further pages if necessary.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Column 1  | Column 2  | Column 3 | Column 4 | Column 5 | Column 6 |
| **Company Name** |  |  |  |  |  |  |
| **Dates of employment**  |  |  |  |  |  |  |
| 1. Indicate marinas where you have had **primary management responsibilities**. Indicate storage capacity by number of berths etc |
| **Marina Name** |  |  |  |  |  |  |
| Wet Berths |  |  |  |  |  |  |
| Dry Stack  |  |  |  |  |  |  |
| Dry Land Storage |  |  |  |  |  |  |
| Moorings |  |  |  |  |  |  |
| **Total Boats** |  |  |  |  |  |  |
| 2.Give approximate gross annual income of these activities in **thousands of Pounds or Euros** |
| Wet Berths |  |  |  |  |  |  |
| Dry Storage |  |  |  |  |  |  |
| Dry Land Storage |  |  |  |  |  |  |
| Moorings |  |  |  |  |  |  |
| Fuel |  |  |  |  |  |  |
| Marine Store |  |  |  |  |  |  |
| Boat repairs/service |  |  |  |  |  |  |
| Boat Sales |  |  |  |  |  |  |
| Boat Rentals |  |  |  |  |  |  |
| Strata Title Management |  |  |  |  |  |  |
| Retail Space rental |  |  |  |  |  |  |
| Office Space Rental |  |  |  |  |  |  |
| Restaurant income/rental |  |  |  |  |  |  |
| Industrial/other income |  |  |  |  |  |  |
| Accommodation |  |  |  |  |  |  |
| **Total** |  |  |  |  |  |  |
| 3. What **proportion of your time** during an average week is/was spent on the following activities? Display as a percentage. |
| Financial Planning |  |  |  |  |  |  |
| Marketing, Sales and Customer Relations |  |  |  |  |  |  |
|  Equipment operation |  |  |  |  |  |  |
| Staff Administration |  |  |  |  |  |  |
| Administration |  |  |  |  |  |  |
| Servicing boats/engines |  |  |  |  |  |  |
| 4. Months worked as a General Manager, or reporting directly to a General Manager? |
|  |  |  |  |  |  |  |
| 5.How many employees do/did you supervise in this position |
|  |  |  |  |  |  |  |

**Additional comments:**

## 7. Experience Credit Form: Part two Management Experience

**Instructions:** Indicate your marina management experience by placing an X in the boxes below that accurately reflect your duties and responsibilities and the level of your authority. Evaluate each function as it applies to the marina or marinas you have managed.

The 14 functions on this page are those typically associated with a marina manager. Study the functions carefully and check only those for which you are or were accountable. The time periods must coincide with responses to Employment History section of the application form.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Column 1  | Column 2  | Column 3  | Column 4  | Column 5  |
| **Company Name**  |  |  |  |  |  |
| **Dates of Employment** |  |  |  |  |  |
| **Marina Management Functions** |
| **1**.Routinely manage on site personnel either directly or through other, including recruiting, line management and performance management |  |  |  |  |  |
| **2**.Provide purchasing authority, approve invoices, negotiate or approve contracts for goods or services to an agreed limit with owner. |  |  |  |  |  |
| **3.** Regularly direct employees or contractors who perform maintenance and repair work, judging work performance, adherence to specifications, and observance of safety regulations. |  |  |  |  |  |
| **4**. Regularly conduct or supervise scheduled on-site inspections. |  |  |  |  |  |
| **5.**Routinely meet with marina occupants on management matters. |  |  |  |  |  |
| **6**.Establish and supervise operating policies and procedures, such as working hours, training procedures, and accountability for equipment. |  |  |  |  |  |
| **7**. Authorise expenses to an agreed limit with owner |  |  |  |  |  |
| **8**. Supervise the monitoring of receipts, accounts, banking and debtors |  |  |  |  |  |
| **9**. Supervise the process of boat storage renting and lease renewal |  |  |  |  |  |
| **10**. Prepare annual budgets, including capital expenditure budgets, or review and authorise such budgets prepared by subordinates |  |  |  |  |  |
| **11**. Review and regularly approve operating statements. |  |  |  |  |  |
| **12.** Evaluate efficiency and update status of management and accountancy programmes used. |  |  |  |  |  |
| **13.** Develop or authorise marketing objectives and plans. |  |  |  |  |  |
| **14**. Review and agree annually the insurance requirements of all aspects of Marina property and operations. |  |  |  |  |  |
| **For internal use only** *Total Marina Management Functions performed* |  |  |  |  |  |

**Experience Credit Form: Part two Management Experience (continued)**

The 12 functions on this page are those typically associated with a marina property. Study the functions carefully and check only those for which you are or were accountable. Not every marina manager will have all of these experiences. The time periods must coincide with responses to Employment History on Page 1.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Column 1  | Column 2  | Column 3  | Column 4  | Column 5  |
| **Company Name** |  |  |  |  |  |
| **Dates of Employment** |  |  |  |  |  |
| **Marina Management Functions**  |
| **15**. Agree and regularly review the berthing and service charges. |  |  |  |  |  |
| **16**. Manage the day-to-day operation of the marina with full authority |  |  |  |  |  |
| **17**. Prepare, analyse, review financial budgets and forecasts |  |  |  |  |  |
| **18**. Identify and keep abreast of applicable laws, regulations and statutes relevant to the operation of the marina. |  |  |  |  |  |
| **19**. Regularly review estimates of value and assess the implications these estimates have in comparison to similar marinas; determine reasonableness of assessed and insurable value. |  |  |  |  |  |
| **20.** Analyse and recommend improvements for more efficient use of property and marina assets |  |  |  |  |  |
| **21.** Identify, analyse and implement, or approve, major maintenance, or remodelling programs.  |  |  |  |  |  |
| **22.** Identify and recommend major variances from the budget, exclusive of emergencies. |  |  |  |  |  |
| **23**. Take responsibility for compliance with applicable regulations. |  |  |  |  |  |
| **24.** Prepare/present permit application, and/or environmental impact information. |  |  |  |  |  |
| 25. Authorise the establishment of, or approve controls for, management information system (e.g. accounting systems.) |  |  |  |  |  |
| **26**. Analyse and approve submissions for financing based upon a working knowledge of packaging and analysing loan submittals. |  |  |  |  |  |
| **For Internal Use only*****Total Asset functions performed:*** |  |  |  |  |  |
| ***Total Functions Performed*** |  |  |  |  |  |
| ***Comments:*** |

## 8. Comparably sized facility information

Provide the following information for a minimum of five marina facilities that are of comparable size to yours within your geographical region.

Note this section does **not** need to be completed if the applicant’s current marina has a gross operating revenue of AUD1,000,000, £ 600,000, €750, 000, US1,000,00 or more or at least 100 boats in wet berths, mooring and /or dry stack spaces.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| **Marina Name and Address** |  |  |  |  |  |
| No. of Wet BerthsNo. of Dry Stack SlotsNo. of MooringsNo. of Dry Store Spots |  |  |  |  |  |
| Total Boat Capacity |  |  |  |  |  |
| Rate information:Wet Berth Rate*Summer season**Winter Season*Dry Stack rateMooring RateDry Storage Rate |  |  |  |  |  |
| Operations:Sell Fuel (yes/no) Chandlery (yes/no)Service/Repairs (Yes/no)Boat Rentals (Yes/no)Boat Sales (Yes/no) |  |  |  |  |  |
| Restaurants (yes/no) |  |  |  |  |  |
| Office space leased (yes/no)Retail space leased (yes/no) |  |  |  |  |  |
| Industrial or other use, If yes what? |  |  |  |  |  |
| No. of Employees |  |  |  |  |  |

## 9. Employment Narrative

In your own words write an employment narrative report that showcases your experience in performing all six core and three non-core management functions. Reference the Certified Marina Manager Handbook for a detailed description and guidance on how to structure this report. Submit the completed narrative as a PDF along with this application form.

## 10. Supporting Documentation

Ensure you attach the following supporting documentation when submitting your application.

* Organisation Chart
* Photographs of facility
* Letters of Reference
* Current CV
* Copy of AMM certificate
* Latest Annual Marina Operating Statement (Please mark this as confidential and submit separately if you do not want this information to be circulated to the review panel)

## Verification of information

I hereby acknowledge that the information provided in this application form, along with all supporting documentation, is true and accurate to the best of my knowledge and ability. I understand that the information may be validated by the review panel if necessary and that any false or misleading information could result in the rejection of my application.

I acknowledge that this application and its supporting documentation will be shared with the review panel and individuals involved in the certification process, unless stated otherwise.

**Name:**

**Signature:**

**Date:**