

CIMA Diploma in Performance Management Self-assessment Form

In selecting the entry requirement as a working adult from a CIMA selected organisation to be a CIMA student, I confirm that:

1. I have read and understood CIMA's syllabus.
2. I have read and understood CIMA's examination and assessment approach.
3. I have read and understood CIMA's practical experience requirements.
4. I understand the risks of progression in CIMA if I do not study for the exams.
5. I understand the CIMA Code of Professional Ethics and what it means to me as a CIMA student.

In view of the above I undertake that I will endeavor to minimise the related risks to my employer, CIMA and myself. *(Please tick box if you are agreeable)*

Applicant's Signature	Reviewed & approved by CIMA regional office
Signed: _____	Signed: _____
Name: _____	Name: _____
Designation: _____	Job Title: _____
Company: _____	Country: _____
Date: _____	Date: _____
	Reviewed & approved: <u>Yes</u>

CIMA Diploma in Performance Management Student Information Part 1

Name	
CIMA contact ID <i>(if you have registered previously)</i>	
Which CIMA exams have you taken previously?	
Email address	
Contact No	
Correspondence Address	
Date of birth	
Employer	
Higher Education qualification <i>(Post-secondary)</i>	