



CHI APPLICATION FORM

Certified Hospitality Instructor

Ref Code:

APPLICATION CHECKLIST

Have you included the following required documents?

- Completed CHI application form
- Employment Verification Form (signed by your immediate supervisor)
- Payment

SECTION 1 – ELIGIBILITY REQUIREMENTS

To successfully earn the CHI, a candidate must complete the following requirements:

- Successful completion of Level 1 and Level 2 of the CHI self-study materials and exams
- Complete 120 hours of internship with a hospitality organization. (Signed Internship Verification Form must be turned in upon completion of the program.)
- Be currently employed as a secondary school hospitality instructor or workforce program hospitality instructor

Please send all correspondence regarding the CHI program to my:

- Home Address Business Address

High school instructors: If you will be pursuing the CHI outside the academic year, please select HOME address.

SECTION 2

PERSONAL AND PROFESSIONAL DATA (Correspondence will be sent to your business address unless otherwise indicated.)

PRINT Name (Mr./Ms./Mrs.)		Birth Date	FOR OFFICE USE ONLY
Home Mailing Address			
City/State or Province		Postal Code/Country	
Business Phone ()	Home phone/cell phone ()		
Business e-mail	Personal e-mail		
Customer #			
Payment/check #			
Order #		Enrollment Date	
PRESENT POSITION		When did you begin? (month/year)	School District Name and Address (if applicable)
School/Workforce Program Name			
Mailing Address			School District Contact Name and Phone Number
City/State or Province		Postal Code/Country	()
Name of Administrator			

SPECIAL ACCOMMODATIONS

The Certification Commission supports the intent of the Americans with Disabilities Act (ADA). If you require special assistance during the certification examination, check the box below. Submit appropriate documentation substantiating your disability with this application. Call the Professional Certification Department at +1-407-999-8100, if you have any questions.

- I request special examination assistance or a test modification during the examination due to a disability. With this application, I am including documentation of my disability in order to receive special accommodations.**

Auxiliary aids and services can only be offered that do not fundamentally alter the measurement of skills or knowledge the examination is intended to test – Americans with Disabilities Act, Public Law 101-334 §309(b)(3)

SECTION 3 – FEES/PAYMENT

The CHI certification program fee is U.S. \$750. If for some reason, you do not meet the requirements, your program fee will be returned in full. Upon acceptance into the program, fees are non-refundable and non-transferable. (*Prices are subject to change without notice*).

This fee includes:

- Exam Preparation Material for the Certified Hospitality Instructor program.
- Application and Exam Fee.
- Certificate, Lapel Pin and the CHI Designation for candidates **who successfully fulfill the certification requirements**.

My check or money order is enclosed, made payable in U.S. funds drawn on a U.S. bank to: **Educational Institute**.

Please bill my credit card: Visa Mastercard American Express Diners Club Discover Card

Account Number _____ Expiration Date _____ Security code _____

Cardholder Signature _____ Print Name _____

Purchase Order is enclosed. Please note: Billing status must be approved by the Educational Institute before P.O. can be accepted as a form of payment.

SECTION 4 – 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 CHI 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 CHI 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 CHI program and fees associated with the program are non-refundable and non-transferable.

Signature: _____ Date: _____

Print Name: _____

Certified Hospitality Instructor (CHI) Program

Earning the Certified Hospitality Instructor (CHI) signifies that the recipient has mastered the subject matter necessary to teach essential hospitality knowledge and skills in the classroom. The CHI must successfully complete Level 1 and Level 2 of the self-study materials, including an online exam for each level, and also complete a 120-hour hospitality internship. Content for the Level 1 and Level 2 material includes:

Level 1

Unit 1 Introduction to Hospitality and Guest Service

Service Makes the Difference
Exploring Hospitality Careers
Hotel Organization and Management

Unit 2 Operations

Front Office Operations
Planning and Organizing the Housekeeping Department
The Role, Cost, and Management of Hospitality Facilities
Food and Beverage Operations
Facility Design, Décor, and Cleaning
Sanitation, Safety, Security, Health, and Legal Issues

Unit 3 Finance

The Front Office Audit
Revenue Management
Controlling Expenses
Labor and Revenue Control

Level 2

Unit 1 Leadership

The Changing Nature of Leadership and Management
The Challenge of Diversity
Goal-Setting, Coaching, and Conflict Management Skills

Unit 2 Human Resources

Employment Laws and Applications
Compensation Administration
Incentive and Benefits Administration

Unit 3 Sales and Marketing

Introduction to Hospitality Sales and Marketing
The Marketing Plan
Advertising, Public Relations, and Publicity
Marketing to Special Segments

Unit 4 Safety and Security

Security in the Lodging Industry
Safety and Security Systems
Emergency Management and Media Relations



CHI RECOMMENDATION AND EMPLOYMENT VERIFICATION FORM

Certified Hospitality Instructor

PLEASE TYPE OR PRINT CLEARLY.

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

(Note: AHLEI'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	(school/workforce program)		
in the position of	(title)		
for the period of	(month/year)	through	(month/year)
His/Her responsibilities include:			
Additional comments:			

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 CHI applicant. I will, if called upon, answer any questions regarding the employment of the stated CHI applicant.*

- I do not recommend this person for acceptance as a CHI candidate.*

Signature:		Date:
Your Name (Mr./Ms.):		
Title:	School name/Program name:	
Address:	City:	
State or Province:	Country:	Zip/Postal Code:
Business Telephone: ()	Fax: ()	e-mail

THIS COMPLETED FORM MUST ACCOMPANY THE CHI APPLICATION