

Alabama Certified Mapper Exam

APPLICATIONS RECEIVED AFTER JANUARY 29, 2021 WILL NOT BE PROCESSED

The following information will aid the candidate for the Alabama Certified Mapper designation in applying for candidacy and in preparing to take the ACM comprehensive examination.

Design of Exam:

The ACM Exam is a comprehensive examination designed to test for knowledge and understanding of mapping principles and the application of mapping skills required of a professional mapper. The exam is in two parts. Part I (2 hours) consists of 100 multiple choice and true/false questions dealing with all aspects of mapping, especially material specific to Alabama. Part II (5 hours) consists of a major case problem relating to the application of mapping.

Each of the two parts of the mapping exam must be passed with a 70% or higher. Part I has a total of 100 points possible, with a minimum of 70 points for passing. Part II has a total of 200 points, with a minimum of 145 points for passing. Upon successful completion of this examination and completion of the experience requirements, the Certified Mapper designation will be conferred by the Department of Revenue.

Format of Exam:

The exam is designed to take seven hours to complete. Two hours are allowed for Part I of the exam. A maximum of five hours are allowed for Part II.

Basic Knowledge:

Alabama Basic Mapping, Alabama Intermediate Mapping, Alabama Advanced Mapping, Alabama Subdivision Layouts & Right of Ways and IAAO 600 Cadastral Mapping are the common body of knowledge shared by each candidate. The exam has been developed around these areas.

Dates and Location of Exam:

Part I of the exam will be given on March 11 and Part II of the exam will be given on March 12, 2020.

Examination and Certification Fee:

A non-refundable fee of \$165.00 should be submitted by the applicant at the time of applying for Admission to Candidacy. The fee includes both examination and processing costs. Please make checks payable to **AUBURN UNIVERSITY**.

Other (Deadline):

If the applicant is registered for a course to be held **after** the application deadline, the January 29 deadline still applies. Indicate the course and the date it is being held on the application. These applications will be processed contingent upon successful completion of the course.

MAIL ALL APPLICATIONS TO:
Property Tax Certified Examinations
Government & Economic Development Institute
213 Extension Hall
Auburn University, AL 36849-5225

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Steps for Obtaining ACM Designation

I. Application for Admission to Candidacy

- A. Successful completion of a minimum of 130 hours of approved coursework. The 130 hours consists of:
 - Alabama Basic Mapping
 - Alabama Intermediate Mapping
 - Alabama Advanced Mapping
 - Alabama Subdivision Layouts & Right of Ways, and
 - IAAO 600 Cadastral Mapping
- B. Completion of Application for Admission to Candidacy
- C. Signature of Immediate Supervisor and Elected Official

II. Completion of Mapping Experience Form

- A. Applicant may not apply to take the examination prior to completion of the minimum of three years' experience.
- B. A minimum of three years applied experience in Alabama mapping procedures is required. Out-of-State experience will be reviewed on a case by case basis. Out-of-State experience of three years or more will equal to not more than one year of In-State. The required years of experience must be met by application closing date.
- C. Signature of Immediate Supervisor and Elected Official

III. Review by Committee

IV. Notification of the Applicant

V. Administration of the Exam

VI. Notification of Exam Results

GEDI will notify the Department of Revenue of exam results. The Department will then notify the candidate of the results. The designation will be conferred upon the successful candidate.

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**Alabama Certified Mapper
Application for Admission to Candidacy**

Name _____ Title _____

Last Four of Social Security Number _____ County _____

Complete Address _____

Office Phone _____ Fax Number _____

Email Address _____

REQUIRED COURSES

Alabama Basic Mapping

Course Location _____ Course Date _____ Grade _____

Alabama Intermediate Mapping

Course Location _____ Course Date _____ Grade _____

Alabama Advanced Mapping

Course Location _____ Course Date _____ Grade _____

Alabama Subdivision Layouts and Right of Ways

Course Location _____ Course Date _____ Grade _____

IAAO 600 Cadastral Mapping

Course Location _____ Course Date _____ Grade _____

*** Applicant's supervisor (when not the elected official) and elected official must sign Experience Questionnaire.**

I have taken the ACM Exam in the past (Select one) YES NO
If YES, indicate Year Last Test Taken _____

A letter will be sent to those who fail indicating concept areas that were missed by 30% or more and a course will be recommended by the Property Tax Division of the Alabama Department of Revenue and the Government and Economic Development Institute to assist the participant in gaining the necessary knowledge and skills in the concept areas missed. *If a candidate is unsuccessful during the March exam, they will have a second opportunity on September 9 and 10, 2021 to retake the exam after registering and paying the exam fee. If a candidate is unsuccessful during the exam retake in September, that candidate would need to reapply to take the exam the following year through the normal exam application process. If a candidate is successful in passing the exam in September, they would qualify for the appropriation funds the following fiscal year beginning October 1.*

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Mapping Experience

An applicant for Admission to Candidacy for the Alabama Certified Mapper designation must have a minimum of three years' applied experience in Alabama mapping procedures. On separate forms provide the information requested in fulfillment of this requirement.

(COMPLETE A FORM FOR EACH JOB – COPY AS NECESSARY)

APPLICANT'S NAME _____

Title _____ Beginning Date _____ Ending Date _____

Employer _____ Department _____

Employer's Address _____

Immediate Supervisor _____ Supervisor's Title _____

Supervisor's Phone _____

Duties and Responsibilities (please type or print)

List in detail and *in your own words* tasks required for your job position.

After reviewing this experience form, I verify that the information is accurate and truly reflects the duties and responsibilities of this applicant.

Applicant's Signature _____ Date _____

Elected Official's Signature _____ Date _____

Supervisor's Signature _____ Date _____

(Required when Elected Official is Not Immediate Supervisor)

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FOR GEDI USE ONLY

Date Received _____ Application Number _____

Course Hours Verified _____ Experience Verified _____

ADMISSION TO CANDIDACY APPROVED _____