Application for Designation of Massachusetts Certified Public Purchasing Officer (MCPPO)

After satisfying the seminar and training requirements for one of the MCPPO designations, an individual may apply for certification in the appropriate category. The application requires information about the applicant’s current position, seminars and trainings completed, relevant work history, education, and any criminal or civil violations. To be eligible for any designation, the applicant must currently hold a public procurement position with a Massachusetts public entity.

<table>
<thead>
<tr>
<th>Education and Experience Requirements</th>
<th>Education</th>
<th>Experience</th>
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<tbody>
<tr>
<td><strong>Designation</strong></td>
<td><strong>Education</strong></td>
<td><strong>Experience</strong></td>
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<tr>
<td>MCPPO</td>
<td>High school diploma or equivalent, and successful completion of the Public Contracting Overview, Supplies and Services Contracting, and Design and Construction Contracting seminars</td>
<td>5 years public procurement, <strong>including 2 years management or supervisory experience in MA</strong>*</td>
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<td>OR Bachelor’s degree and successful completion of the 3 designated seminars</td>
<td>4 years public procurement, <strong>including 2 years management or supervisory experience in MA</strong>*</td>
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<td>OR Bachelor’s degree, qualifying graduate degree in a related field, and successful completion of the 3 designated seminars</td>
<td>3 years public procurement, <strong>including 2 years management or supervisory experience in MA</strong>*</td>
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<td>MCPPO for Supplies and Services</td>
<td>High school diploma or equivalent and successful completion of the Public Contracting Overview and Supplies and Services Contracting seminars. [same criteria as above for education substitutes]</td>
<td>[same criteria as above]</td>
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<tr>
<td>MCPPO for Design and Construction</td>
<td>High school diploma or equivalent and successful completion of the Public Contracting Overview and Design and Construction Contracting seminars. [same criteria as above for education substitutes]</td>
<td>[same criteria as above]</td>
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<tr>
<td>Associate Levels (available for all designations)</td>
<td>High school diploma or equivalent and successful completion of required seminars and training classes as outlined above.</td>
<td>1 year public procurement in MA</td>
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</table>

* Required MCPPO seminars must be completed within three years prior to application.
** “Procurement” means buying, purchasing, leasing, or otherwise acquiring supplies, services, design services, or construction work, and all of the functions that pertain to such acquisition, including description of requirements, selection of sources, solicitation and evaluation of offers, contract preparation and award, and all phases of contract administration, performed by an individual employed by a public entity. To qualify as public procurement experience, a position must entail a minimum of 75 hours per month.
*** “Management” means managing or administering a procurement activity, but does not include principally clerical or data entry functions. To be considered a public procurement management position, a position must entail:
- decision-making authority with respect to procurement activities, or
- authority with respect to the procurement activities of public employees whose primary responsibility is procurement, or
- substantial responsibility for providing legal advice on procurement matters to public employees whose primary responsibility is procurement, or
- substantial responsibility for conducting performance reviews or audits of public procurement activities.
“Supervisory” means supervising (with authority to hire and fire) public employees whose primary responsibility is procurement.
Application for Designation of Massachusetts Certified Public Purchasing Officer (MCPPO)

General Information

Mr. Mrs. Ms. Dr.
Name to appear on certificate: ____________________________________________

Job title: ____________________________________________

Jurisdiction/agency: ____________________________________________ Telephone no. _______________________

Business address: ____________________________________________ City: __________ State: ___ Zip code: ______

Home address: ____________________________________________ City: __________ State: ___ Zip code: ______

Home telephone: ________________________ D.O.B.: ______ E-mail address: ______________________

Designation Requested

☐ MCPPO
☐ MCPPO for Design and Construction
☐ Associate MCPPO
☐ Associate MCPPO for Design and Construction
☐ MCPPO for Supplies and Services
☐ MCPPO Recertification
☐ Associate MCPPO for Supplies and Services

Dates and titles of MCPPO seminars attended: ____________________________________________

Work Experience

List the most recent position and all employment relevant to the designation requirements. Applications for other than an Associate designation require a separate position description signed by your supervisor that indicates your management or supervisory experience and responsibilities.

Starting/Ending Dates Employer Jurisdiction/Agency Official Position
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Academic Degrees Earned

All applicants must provide information on high school or equivalent. Provide college and graduate school information if requesting a substitution for work experience.

Name and Location Major Graduation Year Degree
1. High school or equivalent
2. College
3. Graduate school
4. Other

- Continued -
Mandatory Questionnaire

Application for Designation of Massachusetts Certified Public Purchasing Officer (MCPPO), continued

MCPPO designation may be denied or revoked based on:
- Conviction of a felony or final adjudication by a court or administrative agency of a civil or criminal violation of law relating to procurement, antitrust, conflict of interest, embezzlement, theft, forgery, bribery, falsification or destruction of records, or any other offense indicating a lack of integrity.
- Substantial evidence of willfully supplying to the Office of the Inspector General false information relating to any public procurement or of willful failure to comply with record-keeping requirements prescribed by law or regulation.
- A finding of repeated procurement law violations of sufficient frequency and severity so as to evidence a pattern of noncompliance.

Please answer the questions below. For every “yes” answer, provide a separate written explanation.

1. Have you ever been convicted of a felony? □ Yes □ No

2. Have you ever been convicted or found responsible in a final adjudication by a court or administrative agency of a civil or criminal violation of law relating to procurement, antitrust, conflict of interest, embezzlement, theft, forgery, bribery, falsification or destruction of records, or any other offense indicating a lack of integrity? □ Yes □ No

Release

I hereby swear under the pains and penalties of perjury that the information in this application is complete and accurate. I hereby authorize the Office of the Inspector General to obtain records from all educational institutions and places of employment listed in this application for the purpose of verifying my level of education, employment history and faithful adherence to the law.

______________________________  ____________________
Signature of applicant                      Date

Application Fee

NOTE: Faxed applications will not be accepted. Payment must accompany your application. Allow 90 days for processing.

Application Fee: $75 (non-refundable if designation is denied)

Mail to: Office of the Inspector General
         MCPPO Program
         Attn: Joyce McEntee Emmett, Director
         One Ashburton Place, Room 1311
         Boston, MA 02108

Reminder: Recertification is required every 3 years from the award date of designation certificate.
Massachusetts Certified Public Purchasing Official Training Program

Criminal Offender Record Information (CORI) Acknowledgement Form

The Office of the Inspector General (OIG) is authorized under the provisions of M.G.L. c. 6, § 172, to receive CORI for the purpose of screening applicants for MCPPO/MCSPO designation, certification and recertification. As an applicant for MCPPO/MCSPO designation, certification or recertification, I understand that a CORI check will be conducted for conviction information only and that the results of the record check will not necessarily disqualify me. I also understand that a CORI check will be submitted for my personal information to the Department of Criminal Justice Information Services (DCJIS). I hereby acknowledge and provide permission to submit a CORI check for my information to DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing written notice to the OIG of my intent to withdraw consent to a CORI check. By signing below, I provide my consent to a CORI check and acknowledge that the information provided on this acknowledgment form is true and accurate.

________________________________________________ ______________
Applicant Signature                       Date

___________________________        ____________________________         ______________________________
LAST NAME  FIRST NAME               MIDDLE NAME

MAIDEN NAME (OR OTHER NAME(S) BY WHICH YOU HAVE BEEN KNOWN)

DATE OF BIRTH                            PLACE OF BIRTH

MOTHER’S FULL MAIDEN NAME               FATHER’S FULL NAME

LAST SIX DIGITS OF YOUR SOCIAL SECURITY NUMBER: _________ - _____________________________

ADDRESS: _________________________________            FORMER ADDRESSES: _______________________

SEX: _____         HEIGHT: ____ FT.____IN.         EYE COLOR: _________

STATE DRIVER’S LICENSE NUMBER: ____________________________         STATE OF ISSUE: ______

You may submit this form in person to the Office of the Inspector General, at which time you will be required to present a valid government-issued photo identification. Alternatively, you may submit the form by mail, in which case you must first notarize the form and include with it a photocopy of your valid government-issued photo identification.

(For OIG Use Only)

The above information was verified by reviewing the following form(s) of government-issued identification:

_______________________________________________________
VERIFIED BY: _________________________________________
Name of Verifying Employee (Please Print)

________________________________________
Signature of Verifying Employee