

EARN THE NEW STANDARD IN HR CERTIFICATION

SHRM-CP / SHRM-SCP PREPARATION

This is an exciting and pivotal time in the HR profession. Now, more than ever, HR teams are required to assume a greater leadership role and contribute to the strategic direction of their organization. The HR profession is no longer just about **what** you know—but **how** you perform.

Establish yourself as a globally recognized human resource expert by earning the new standard in HR certification: SHRM Certified Professional (SHRM-CP™) and SHRM Senior Certified Professional (SHRM-SCP™). These professional certifications can open doors for professional advancement, serve to harmonize standards with changing expectations and signal to employers the importance of advanced professional development. They reflect what HR practitioners need to know to be leaders in their organizations and profession.

Employers Group's Certification Preparation Program, designed for SHRM credential candidates, will help **Prepare, Expand, and Test** your knowledge and practical real-life competencies in areas critical for HR career success.

This intensive **12 week** (one instructor-led virtual session per week) program combines expert instruction with the SHRM Learning System® for SHRM-CP/SHRM-SCP, so you will learn faster, retain more and stay on track for success on the exam.

SHRM® CERTIFICATION SHRM-CP™ AND SHRM-SCP™

Content Covered

Behavioral Competencies: Leadership and navigation, Ethical practice, Business acumen, Relationship management, Consultation, Critical evaluation, Global & Cultural effectiveness, Communication

People: HR strategy planning, Talent acquisition & retention, Employee engagement, Learning & development, Total rewards

Organization: Structure of the HR function, Organizational effectiveness & development, Workforce management, Employee relations, Technology & data.

Workplace: HR in the global context, Diversity & inclusion, Risk management, Corporate social responsibility, Employment law & US regulation

Delivery & Registration Details

Dates: Weekly : March 1 to May 17, 2018
Weekly: September 13 to December 6, 2018
(Excludes 11/22/18)

Times: 3:00pm – 6:00pm (Pacific)

Location: Online, Instructor-led Virtual Session

Information: Contact training@employersgroup.com
www.EmployersGroup.com/SHRM.html
800.748.8484 x3962



Open Enrollment Registration Fees

Course Fee

\$0 **Eligible for and Using EG State Funding***
\$750 One Web / Phone Connection
\$95 Each Additional Web/Phone Connection
\$100 Late Enrollment Fee (Feb 1 or Aug 13, 2018)

Materials

\$995 2017 SHRM Materials & Online Access
EG Member Special: Deduct \$100 from the materials fee for each participant!

DETAILS: Registrations must be received 3 weeks before program start date. Materials must be purchased through Employers Group for each attendee. Recordings available upon request.

www.EmployersGroup.com/SHRM.html

***State-Subsidized Registration Information:** (1) Apply at www.employersgroup.com/StateEligibility.html, (2) Register anyone (below director-level) who earns at least \$18.00 to \$75.00 per hour (some exceptions allowed) & who are/will remain employed full-time during/90-days after training, and (3) Request a registration form by emailing training@employersgroup.com, (4) Pay \$60 for any missed day (make-up sessions / transferring to another location are **NOT** permitted) / maximum of \$750 if individual does not meet wage, training, or employment requirements. Registration available for the full program only.

Regular Registration Form

(if registering with EG state-funding, use forms on next 2 pages.)



Utilize this registration form to register up to 4 individuals in Employers Group 2018 SHRM-CP / SCP Certification Preparation program. If registering more, please include additional registrant information. Once complete, please scan/email to training@employersgroup.com or fax to 213.226.0216. Visit SHRMcertification.org for exam requirements and more info. Please note that we require a minimum registration of 20 participants to run the program. Materials will be ordered once this number is attained; otherwise, any amounts paid will be returned.

Registrant 1 Name / Title	
Email Address & Phone	
Company Name & Member ID	
Mailing Address	
Registrant 2 Name / Title	
Email Address & Phone	
Company Name	
Mailing Address	
Registrant 3 Name / Title	
Email Address & Phone	
Company Name	
Mailing Address	
Registrant 4 Name / Title	
Email Address & Phone	
Company Name	
Mailing Address	

Fee Type	Amount		Quantity		Total
Course Fee (first connection)*	\$750	x		=	
Additional Connections	\$95	X		=	
Materials (EG Member)	\$895				
Materials (non-Member)	\$995	x		=	
TOTAL					

Check	Mail to: Employers Group Training, 400 Continental Blvd., #300, El Segundo, CA 90245
Credit Card	Card Type & #
	Name on Card
	Signature for Card
	Expiration Date
	Authorization Code
Invoice Me	An invoice will be generated; however, registrations will NOT be processed until payment is received. Payment is due within 15 days of invoice receipt. If delinquent, membership may be suspended until payment is received.
<p>AGREEMENT: This registration confirms that I have authority to register individual(s) named above, that I agree to registration terms at www.employersgroup.com, to pay the appropriate registration fee per registrant as of the date this registration form is received by Employers Group, and know there are no admission requirements to take this program; however, certain criteria must be met for participants taking the SHRM-CP or SHRM-SCP exam. Registration includes materials and preparation course. It does not include additional certification-related fees.</p>	
Print & Sign Name / Title Date	

* must register by February 1 or August 13, 2018; otherwise, an additional \$100 will be applied to the course fee.

SHRM CP / SCP Preparation State-Funded Registration 2018



Complete this registration form and data collection form (next document), if utilizing Employers Group's state-funded training program. If registering more, utilize multiple copies of this form. Once complete, please scan/email to training@employersgroup.com or fax to 213.226.0216. Visit SHRMCertification.org for exam requirements and more info. Please note that we require a minimum registration of 20 participants to run the program. Materials will be ordered once this number is attained; otherwise, any amounts paid will be returned.

Registrant Name / Title	
Email Address & Phone	
Company Name & Member ID	
Register for Spring / Fall 2018?	
Mailing Address	

Fee Type	Amount		Quantity		Total
Materials (per registrant)	\$995	x	1	=	\$995
EG Member Discount*	-\$100	x		=	\$
Indicate Total					\$

Check	Mail to: Employers Group Training , 400 Continental Blvd., #300, El Segundo, CA 90245	
Credit Card	Card Type & #	
	Name on Card	
	Signature for Card	
	Expiration Date	
	Authorization Code	

AGREEMENT: This registration confirms that I have authority to register individual(s) named above, that I agree to registration terms at www.employersgroup.com, and that my employer will pay the materials fee. If the registration is received less than three weeks before program start, express shipping will be required. I acknowledge that there are no admission requirements to take this program; however, certain criteria must be met for participants taking the SHRM-CP or SHRM-SCP exam. You or your employer must remit the materials fee to Employers Group to participate in this program. If paying directly, you acknowledge that your employer will reimburse for the materials fee. Employers Group will accept state payment as payment in full when an individual completes the 12-session (course) and based on the following criteria:

1. Your company must have received noticed by Employers Group that is eligible to participate in the state-funded training program. Complete an eligibility form at www.employersgroup.com/stateeligibility.html
2. You must be currently employed in and living in California and not be in an executive-level position
3. You must earn at least \$18 to \$75 per hour
4. You must complete a data collection form (attached). Because of the information needed, please return it directly to jhull@employersgroup.com.
5. You must attend every training session or your company will be responsible for \$60 per session.
6. You must remain employed with your current employer for 90-days after the preparation program has ended. If employment is terminated, you must notify jhull@employersgroup.com.
7. You must sign and return an original attendance roster. This roster will be sent prior to the final session.

All of the above requirements must be met; otherwise, your company will be responsible for any / all sessions missed at \$60 per session up to a maximum of \$750. You may cancel up to 2 weeks before the program (no fee) and up to the day of the program for a \$150 fee. Cancellations after program start are subject to a fee of \$750. No refunds for materials once shipped.

If trainee does not have budgetary authority, please obtain the appropriate supervisory approval below.

Registrant	
Sign Name Include Date	
Trainee's Supervisor	
Print / Sign Name Include Title & Date	

* must register by February 1 or August 13, 2018; otherwise member discount of \$100 not available.

SHRM CP / SCP STATE-FUNDED REGISTRANT DATA COLLECTION FORM

Only individuals participating in a state-funded registration are required to complete this document and return it. As part of this training opportunity, Employers Group is required to verify trainee employment, other eligibility information and collect trainee statistical information.

Important Information for Trainees:

- **Attend Scheduled Training.** If you are late or leave early attendance may not be recorded.
- **Sign In.** Trainees must sign a special state-funded attendance roster in ink each time they attend class. We need to track every training hour received.
- **Be Engaged.** This training is for a trainee's benefit. They will get out of it as much as they put in.
- **Complete the Information Below.** Please complete **ALL** information below and return this directly to Jeffrey Hull via secure e-fax at 213.226.0216 or scan/email to jhull@employersgroup.com. All information is kept strictly confidential and is used for grant purposes only. Failure to provide valid information will result in no state subsidy.

Please Type (or Print Clearly). Each Box Must Be Completed.

Employer				
Work Address			City, State ZIP	
Last Name:		First Name:		Middle Initial:
Participant Email Address (to receive registration confirmation)				
Job Title:			Date of Hire:	
Social Security Number			Hourly Wage (or equivalent):	
Ethnicity (check): <input type="checkbox"/> Asian (5) <input type="checkbox"/> Black (2) <input type="checkbox"/> Filipino (7) <input type="checkbox"/> Hispanic (3) <input type="checkbox"/> Native American (4) <input type="checkbox"/> Pacific Islander (6) <input type="checkbox"/> White (1) <input type="checkbox"/> _____ (8)	Education Level (highest completed): <input type="checkbox"/> Eighth Grade or Less (1) <input type="checkbox"/> Some High School (7) <input type="checkbox"/> High School Graduate (2) <input type="checkbox"/> GED (3) <input type="checkbox"/> Some College (4) <input type="checkbox"/> College Graduate (5) <input type="checkbox"/> Post-College Graduate (6)	Sex (Check): <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE Disabled (optional) <input type="checkbox"/> YES <input type="checkbox"/> NO	Veteran (optional) <input type="checkbox"/> YES <input type="checkbox"/> NO Home Zip Code:	Age Group (check 1): <input type="checkbox"/> Less than 25 (1) <input type="checkbox"/> 25 to 34 (2) <input type="checkbox"/> 35 to 44 (3) <input type="checkbox"/> 45 to 54 (4) <input type="checkbox"/> 55 to 64 (5) <input type="checkbox"/> 65 or older (6)

Return complete registration packet to jhull@employersgroup.com