COUNTER TERRORISM
CERTIFICATION BOARD

CTCB Application

Terms & Conditions of CTCB Application

1. CTCB Board reserves the right to reject the application due to lack of documents submitted, not meeting eligibility requirements or not filling the application properly
2. Only participants who have met the eligibility criteria, followed the application process and passed the examination with over 70 point will be certified.
3. The personal data that you provide to CTCB Board will be treated as confidential. Such data may include personal particulars, family data, assessment records, etc.
4. The data collected is limited to what is necessary to facilitate the carrying out of activities by CTCB Board as Certification Body.
5. CTCB Board recognises the importance of safeguarding personal information. To safeguard your personal data, all electronic storage and transmission of personal data is secured with appropriate security technologies.
6. CTCB Board may share necessary data with other Government agencies, so as to serve you in a most efficient and effective way, unless such sharing is prohibited by law.
7. CTCB Board will NOT share your personal data with non-Government entities, except where such entities have been authorised to carry out specific Government services.
8. Please contact CTCB Board via www.cctpworld.com:

   a. For any enquiries or feedback on our data protection policies and procedures.
   b. If you require more information on or access to the data which you have earlier provided to us.
   c. To withdraw consent for the use of personal data.

Before you start your application, you may wish to have the following documents ready to attach:

1. Copy of your passport
2. Educational Qualifications (diploma, professional certificates, bachelor/master degree) if any
3. Other relevant evidences and documents based on certification scheme

Cancellation

Cancellation charges will be applied as follows:

- 0% more than 20 working days before the exam date.
- 50% between 19–6 working days before the exam date.
- 100% less than 5 working days before the exam date.

Name *
Name to Reflect on Certificate

First | Last

Title *
Indicate N/A if not applicable

ID number / passport number *

Age *
Must be at least 25 years of age

Organization name *
Indicate N/A if not applicable

Telephone *
Include country code

+

Email *

Address

Street Address *

Street Address Line 2

City * | Region *

Postal / Zip Code * | Country *

STEP 1/6

COUNTER TERRORISM
CERTIFICATION BOARD

CTCB Application

CERTIFICATION SCHEME - Choose one

Minimum Requirements for Education or Background
Please select which applies to you.

- ☐ Certified Counter Terrorism Practitioner (CCTP)
- ☐ Certified Intelligence Analyst (CITA)
- ☐ Certified Emergency Response Officer (CERO)
- ☐ Certified Physical Security Consultant (CPSC)

EDUCATION

Start with your highest education

College / University name *	*City / Country* *	*Graduation date* * *(mm/dd/yyyy)*	*Program of study or Major* *	*Degree achieved* *

College / University name *	*City / Country* *	*Graduation date* * *(mm/dd/yyyy)*	*Program of study or Major* *	*Degree achieved* *

College / University name	*City / Country*	*Graduation date (mm/dd/yyyy)*	*Program of study or Major*	*Degree achieved*

College / University name	*City / Country*	*Graduation date (mm/dd/yyyy)*	*Program of study or Major*	*Degree achieved*

College / University name	*City / Country*	*Graduation date (mm/dd/yyyy)*	*Program of study or Major*	*Degree achieved*

COUNTER TERRORISM
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Employment and Professional Experience

SUMMARY OF PROFESSIONAL EXPERIENCE

(Minimum of 2 required or until you reach 5 years of experience). Start with your current experience

Title *	Employer *	Years of experience *
Title *	**Employer ***	**Years of experience ***
Title	**Employer**	**Years of experience**
Title	**Employer**	**Years of experience**

PROFESSIONAL REFERENCES (Minimum of 2 Required)

References should have personal knowledge of and be able to validate your security experience, character and good standing

Name *	Company *	Title *
Relationship *	**Telephone ***	**E-mail ***
	+	
Name *	**Company ***	**Title ***
Relationship *	**Telephone ***	**E-mail ***
	+	
Name	**Company**	**Title**
Relationship	**Telephone**	**E-mail**
	+	
Name	**Company**	**Title**
Relationship	**Telephone**	**E-mail**
	+	

COUNTER TERRORISM
CERTIFICATION BOARD

Professional Certifications and Credentials

(CCTP, PSP, CPP, BCM, CEM, First Aid, TECC etc)

Certification name	Issued On	Expires On	Certification Number

Certification name	Issued On	Expires On	Certification Number

Certification name	Issued On	Expires On	Certification Number

Certification name	Issued On	Expires On	Certification Number

First Aid/CPR/AED/TCCC/TECC certifications (for CERO only)	Issued On	Expires On	Certification Number

COUNTER TERRORISM
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DISCLOSURES AND AGREEMENTS

1. Have you ever been convicted of a felony? *

No Yes If yes, explain

2. Have you ever been convicted of a misdemeanor? *

No Yes If yes, explain

3. Have you ever had a professional registration, license or certification denied, suspended or revoked? *

No Yes If yes, explain

4. Have you had any bankruptcy status in the past 3 years? *

No Yes If yes, explain

5. Do you have any criminal record?

No Yes If yes, explain

6. . I hereby certify that all information provided by me in this application form is true and correct to the best of my knowledge, and I have not deliberately omitted and/or misrepresented any material information or fact from this application. I also understand that i must adhere to CTCB code of conduct. Due to the sensitivity of the CTCB Certification program and the information that will be shared I hereby authorize CTCB Board to thoroughly investigate the information on my application, my references, work record and education. I am signing this application personally and typing my full name below to agree that I have read and agree with the terms of this submission *

Yes, I agree to the above statements

Full Name

First *Last*

Date

MM *DD* *YYYY*

I also declare that I will not disseminate any information related to CTCB materials, examination, exam questions and answers, exam structure and other confidential information.

I agree to share my personal data with CTCB Board and agree for CTCB Board to store my data and share necessary data with other Government agencies to facilitate certification process.

Signature (electronic)

COUNTER TERRORISM
CERTIFICATION BOARD

Dear Candidate,

Many thanks for submitting your application we are now processing your application and will contact you within 2 working days.

If you have any questions during the process don't hesitate to email us at **maria@ctcboard.org**

Best Regards,
CTCB Team

PRINT SUBMIT

** please submit this document to maria@ctcboard.org*

STEP 6/6