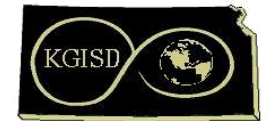


Kansas Association of Mappers



Kansas Association of Mappers  
P.O. Box 3788  
Lawrence, KS 66046  
[www.kansasmappers.org](http://www.kansasmappers.org)

## Professional Designation Program Requirements



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*The Kansas Association of Mappers is a non-profit organization that welcomes the participation of anyone interested in its activities. KAM does not discriminate on the basis of sex, race, color, religion, nationality or ethnic origin in the administration of its policies or programs. For more information, contact: The Kansas Association of Mappers, 1000 W. 12th St., Lawrence, KS 66044, phone: 785/843-2929 or visit our website at [www.kansasmappers.org](http://www.kansasmappers.org).*

**PROFESSIONAL DESIGNATION PROGRAM FEES**

<u>Description</u>	<u>Amount</u>
Candidacy Application Fee	\$25
KM Dues (annual)	\$10
PKM Dues (annual)	\$15
KGISD Dues (annual)	\$15
Comprehensive Examination (as needed)	\$10
Maintenance Program	No Charge
Designation Certificate and Pin	No Charge

**O C R P V G N C P E G**

In order to maintain a high level of professionalism, it is necessary for professional designees to keep abreast of the ever changing mapping profession. In order to maintain the KM, PKM or KGISD designation, the following will be necessary:

1. Maintain continuous active membership in the Kansas Association of Mappers.
2. Submit the appropriate annual program fees.
3. Attain the following maintenance points within a five (5) year period.

KM	40 (forty)
PKM	50 (fifty)
KGISD	50 (fifty)

## THE KM, PKM and KGISD LOGOS

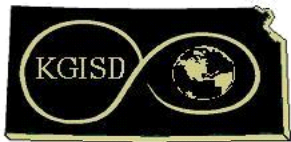
The logos illustrated below have been adopted by the Kansas Association of Mappers to symbolize and denote the *Kansas Mapper*, the *Professional Kansas Mapper*, and the *Kansas GIS Designation* designations. These logos are displayed on the certificates and emblem pins awarded to designated members upon completion of the requirements.



The KM emblem pin is shaped like the State of Kansas and has gold lettering on a rich brown background.



The PKM emblem pin, shaped like the Earth, has a dark blue background, gold lettering, and gold latitude and longitude lines.



The KGISD emblem pin is in the shape of the State of Kansas with a black background. Written and drawn in gold, there is an infinity symbol with a globe on the right and the KGISD letters on the left.

## THE PROFESSIONAL DESIGNATION PROGRAM FEES

The program fees are listed on the opposite page. Each fee is briefly explained below:

- *The Candidacy Application Fee* is required with every application.
- The KM, PKM and KGISD dues are required of all designated members each year, to be paid in addition to and along with annual membership dues.
- Normally, KM, PKM, and KGISD examinations are given at times and locations that are convenient to everyone concerned. If, however, the administration of a designation examination is to be conducted under unusual or complex circumstances, candidates may be required to pay the *Comprehensive Examination fee*.

## KANSAS MAPPER (KM) PROFESSIONAL KANSAS MAPPER (PKM) KANSAS GIS DESIGNATION (KGISD) PROFESSIONAL DESIGNATION PROGRAM

### INTRODUCTION

*"A profession is a body of men who carry on their work in accordance with rules designed to enforce certain standards, both for the protection of its members and for the better service to the public."* R.H. Tawney, Education: The Task Before Us.

The Kansas Association of Mappers was founded in 1986. Soon afterwards, realizing that developing today's maps require a high level of competence in many areas, the Kansas Association of Mappers instituted the KM and PKM, and more recently the KGISD designations. The KM designation is designed for those experienced practitioners who are currently working in some aspect of the mapping field, while the PKM designation is designed for those professionals who are engaged in the use, production or maintenance of cadastral maps. The KGISD designation is designed for experienced GIS professionals who may or may not work with cadastral maps.

Mapping, like other professions, requires special study, knowledge, and skill. It is necessary for maps today - from assessment to planning - to be high quality, information laden tools. Therefore the Kansas Association of Mappers has instituted a program designed to raise the professional standards of mapping personnel and recognize those with superior skills. The professional designation programs outlined herein are a result of this effort.

Attainment of the *Kansas Mapper* (KM), *Professional Kansas Mapper* (PKM) and/or *Kansas GIS Designation* (KGISD) designations are a true challenge. In addition to ability, it requires a substantial amount of study and knowledge. Those who achieve these difficult goals should be very proud; there are some who will fail. Yet if this were not so, the designations would not be worth the time, effort, patience, and skill required to attain them.

## OBJECTIVES

The Professional Designation Program is designed: to raise the standards of the mapping profession; to achieve recognition from governmental authorities and the public of the mapping profession; and to gain recognition for members as qualified, objective and competent mapping professionals.

## PROGRAM ADMINISTRATION

The KM, PKM and KGISD designation programs are administered by the Designation Committee. The chairman and members are appointed by the President of the Kansas Association of Mappers. The duties of the Designation Committee are to prescribe the policy regarding applicant requirements, to screen all applicants, to prepare suitable examinations, and to recommend to the Executive Board individuals qualified to receive these designations.

## CANDIDATE REQUIREMENTS

1. The applicant must be a member in good standing of the Kansas Association of Mappers and must make formal application for candidacy.
2. The applicant must submit the following: (1) a candidacy application form (use insert *or* print form from the KAM website at [www.kansasmappers.org](http://www.kansasmappers.org)); (2) supporting documentation; and (3) the appropriate fee(s).
3. A current KM, PKM, or KGISD designee must attest to the applicant's qualifications by signing their application.
4. Based on the information provided, the applicant will be notified as to the status of candidacy and any pending designation requirements.
5. Applicants must be an approved candidate 30 days prior to sitting for the scheduled designation exam.

8. Professional Reputation  
Protect the professional reputation of other members of KAM who subscribe to and abide by this *Code of Ethics and Standards of Professional Conduct*.
9. KAM Professional Designations  
Use no KAM professional designation unless duly authorized to do so by the Association, and claim no qualifications in reports, testimony, or elsewhere, which are not factual or which may be subject to erroneous interpretation.
10. Recognition  
Strive for the individual and collective recognition of the mapping field as a profession, and continually seek to take advantage of sources of current information and educational opportunities. Give full credit to the originator of any material used in writings or speeches.
11. Prohibited Assignments  
Accept no mapping or other assignment in which the member has an unrevealed personal interest or bias, or which cannot be completed without placing the member's personal integrity or that of the mapping profession in jeopardy.
12. Advertising and/or Solicitation  
Avoid self-laudatory advertising and/or solicitation of engagements, using unwarranted, inaccurate, or misleading claims or promises which are detrimental to the establishment and maintenance of public confidence. The Association declares that such practices on the part of a member constitute unethical and unprofessional conduct.
13. Report Unethical Practices  
Report widely divergent testimony, unethical practices, or other acts by members tending to discredit KAM or to lower the prestige of membership therein to the President of KAM.
14. KAM and Its Officers  
Cooperate with KAM and its officers in all matters, including, but not limited to, the investigation, censure, discipline, or expulsion of members who, by their conduct, prejudice their professional status or the reputation of KAM.
15. Conform  
Conform in all respects to this *Code of Ethics and Standards of Professional Conduct*, and the *Constitution* and *By-Laws* of KAM as the same may be amended from time to time.

## CODE OF ETHICS AND STANDARDS OF PROFESSIONAL CONDUCT

### Preamble

The functions of the cadastral mapper and other members of the Kansas Association of Mappers (KAM) are professional in character. The purpose of *the Code of Ethics and Standards of Professional Conduct* is twofold. Its primary purpose is to establish clear, precise, ethical and professional guidelines for the cadastral mapper and other members of KAM who earnestly seek to discharge their duty to the public and their profession. Its secondary purpose is to provide minimum standards by which to judge KAM members whose conduct is in question. Each member of KAM agrees that they will:

1. Faith and Allegiance  
Give full faith and allegiance to such oaths of office as the member may take, obey all applicable laws and regulations, and apply the law to all individuals alike as may be required of the member.
2. Performance  
Perform all mapping duties in a manner consistent with statutory requirements, without advocacy for, or accommodation of, any particular interests, being factual, objective, unbiased, and honest in all conclusions, and taking care that every map conforms to the highest professional standards.
3. Public Records/Confidential Information  
Make available all maps for public review unless: (1) access is specifically limited or prohibited by law; or (2) information has been obtained on a confidential basis and the law permits such information to be kept confidential.
4. Respectful Attitude  
Maintain, at all times, a courteous and respectful attitude in relations with associates, clients, public officials, and the general public, and a similar attitude on the part of all subordinates.
5. Public Officials  
Cooperate with public officials to improve the efficiency and economy of public administration.
6. Conduct  
Conduct all activities in a manner that will reflect credit upon the member, other members and KAM. Cooperate fully with other members in all matters affecting any official duties the members may have.
7. Appearance of Impropriety  
Use caution to avoid the appearance of impropriety even though, in fact, no impropriety exists or is intended.

## KANSAS MAPPER (KM) DESIGNATION REQUIREMENTS

To qualify for the *Kansas Mapper* designation, an approved candidate shall complete all of the requirements listed below.

1. Have two (2) full years of cadastral mapping experience; or one (1) full year's experience and have successfully completed either a three (3) credit hour college course dealing with mapping, or IAAO Course 600; or one (1) full year's experience and hold a certificate of graduation from a vocational/technical school in mapping or an approved equivalent.
2. Be engaged in the use, production or maintenance of cadastral maps.
3. Successfully complete an approved mapping course or equivalent.
4. Successfully complete a certification exam which will be established and revised when necessary.

## PROFESSIONAL KANSAS MAPPER (PKM) DESIGNATION REQUIREMENTS

To qualify for the *Professional Kansas Mapper* designation, an approved candidate shall complete all of the requirements listed below.

1. Have three (3) full years of cadastral mapping experience or its equivalent.
2. Be engaged in the use, production or maintenance of cadastral maps.
3. Attend a minimum of 30 hours of study in mapping, surveying or a closely related field.
4. Successfully complete the *Map Compilation* portion of the exam, which will be established and revised when necessary, a minimum of thirty (30) days, prior to the scheduled *Master Exam*.
5. Successfully complete the *Master Exam* portion of the examination which will be established and revised when necessary.

## **KANSAS GIS DESIGNATION (KGISD) DESIGNATION REQUIREMENTS**

To qualify for the *Kansas GIS Designation* designation, an approved candidate shall complete all of the requirements listed below.

1. Have completed two (2) years of college in a degree program in a GIS related field or have four (4) years of experience working in a GIS related field.
2. Submit two (2) references relating to the above, only one from current job.
3. Successfully complete a designation examination which will be established and revised when necessary.

## **DESIGNATION EXAMINATION**

A validated examination is necessary to test the applicant's knowledge of mapping and GIS principles and techniques as well as Kansas practices and procedures. Specific information regarding the format of the examination and time limits will be provided to candidates prior to the examination. Each examination may only be taken once within a twelve (12) month period by any one candidate.

The examination will be given only after all other requirements have been met. Examinations must be proctored by an appointed PKM Designee for KM and PKM exams or a KGISD Designee for KGISD exams. An oral examination may be required at the discretion of the Designation Committee.

## **AWARDING THE DESIGNATION**

The candidate shall assert by affidavit that if designated, they will abide by the KAM Constitution, By-Laws and Standards of Professional Conduct. After the candidate completes all requirements for a professional designation, the Executive Board, on the recommendation of the Designation Committee, will confer the appropriate designation.

## **AWARDING HONORARY PKM DESIGNATION**

Any member in good standing who holds a current CMS designation from IAAO is eligible to apply for an Honorary PKM. Candidates shall assert by affidavit that if designated, they will abide by the KAM Constitution, By-Laws, Standards of Professional Conduct and Maintenance requirements. After the candidate completes all requirements for professional designation, the Executive Board, on the recommendation of the Designation Committee, will confer the appropriate designation.

## **EVIDENCE OF THE DESIGNATION**

Each KM, PKM, or KGISD designee will receive a certificate of designation upon completing all requirements, will be recognized as a designee at the following annual conference, and provided an emblem pin.

## **USE OF THE PROFESSIONAL DESIGNATION**

Members of the Kansas Association of Mappers who have been awarded the KM and/or PKM and/or KGISD designation may identify themselves by their designation. KM, PKM and KGISD are the abbreviations for the words *Kansas Mapper*, *Professional Kansas Mapper*, and *Kansas GIS Designation* respectively (it should be noted that the abbreviations do not have periods between the letters).

In the event that the designation of an individual is terminated by resignation, expulsion or for any other reason (and also during any period that an individual's privileges of membership or designation are suspended for any reason) the individual shall refrain from using or displaying the designation of KM, PKM, or KGISD.

The KM, PKM or KGISD certificate of designation and other such evidence of the designation issued at any time to a member of the Kansas Association of Mappers, shall remain the permanent property of the Kansas Association of Mappers and must be returned promptly to the Association upon request of the Executive Board if the membership or designation of the individual to whom such materials are issued is suspended or terminated for any reason.



### OTHER DESIGNATIONS

LIST NATIONAL & INTERNATIONAL PROFESSIONAL MAPPING, APPRAISAL OR GIS RELATED DESIGNATIONS THAT YOU PRESENTLY HOLD. PLEASE ENCLOSE COPIES OF CERTIFICATES OR OTHER DOCUMENTS SHOWING EVIDENCE OF DESIGNATIONS.

### CERTIFICATE AND AGREEMENT

I, \_\_\_\_\_, hereby apply for admission to candidacy for the professional designation: KM ( ) PKM ( ) KGISD ( ). I certify that the information is true and correct. I agree that any further information requested of me by the Designation Committee shall be submitted in a timely manner, and will be true and correct.

It is agreed that the designation, if conferred upon me, and any certificate or emblem of designation, shall at all times remain the property of the Kansas Association of Mappers held by me in trust, and will be returned to KAM upon request of the Executive Board.

I enclose the required application fee. It is understood that the application fee will be refunded to me in full in the event that I am not admitted to candidacy. I further understand that if I am unable to fulfill the candidacy requirements during the first or second year, I will be charged an annual candidacy maintenance fee.

It is agreed that if I am designated as a KM, PKM, or KGISD, I will pay the annual dues as fixed by the Designation Committee and approved by the Executive Board.

It is further agreed that I will abide by the *Code of Ethics and Standards of Conduct* as well as the rules of the Designation Committee concerning the use and evidence of the Professional Designation that I may be awarded.

In submitting this application, I state to KAM that there are not now any outstanding material challenges to my professional responsibility, character, or integrity pending against me, except as explained in the attached statement dated \_\_\_\_\_ (If none, insert the word 'NONE' in the preceding space).

Signed \_\_\_\_\_ Date \_\_\_\_\_

### RECOMMENDATION OF KAM PROFESSIONAL DESIGNEE

I, \_\_\_\_\_ KM ( ) PKM ( ) KGISD ( ), either through the best of my knowledge of the applicant, or by checking with reliable sources, hereby attest to the statements contained within this application.

I understand the importance of the accuracy of the statement contained herein, and I am aware that if any of the statements are in error and I am found willfully negligent in signing this application, I may be censured by the KAM Executive Board.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**NOTE:** In the event that after a reasonable amount of effort the applicant cannot locate a KM, PKM or KGISD to sign this application, the application shall be sent to the KAM office unsigned.

## KANSAS ASSOCIATION OF MAPPERS

### APPLICATION FOR PROFESSIONAL DESIGNATION CANDIDACY

*Instructions to apply:* Complete all appropriate information contained within this application and submit the following to the KAM Designation Committee:

1. The *Application for Professional Designation Candidacy*;
2. Copies of any certificates referred to in the application;
3. The \$25.00 *Candidacy Application Fee*.

The application has been designed to provide the Designation Committee with information that would be found in a typical professional resume. If, however, more space is needed to fully explain your experience and education, then feel free to include an additional sheet. Please print or type responses. Return application materials to:

***The Kansas Association of Mappers  
Designation Committee***

***P.O. Box 3788  
Lawrence, KS 66046-0788***

#### I AM MAKING APPLICATION FOR:

- |                          |   |                          |   |                          |   |
|--------------------------|---|--------------------------|---|--------------------------|---|
| <input type="checkbox"/> |  | <input type="checkbox"/> |  | <input type="checkbox"/> |  |
|                          | KANSAS MAPPER   |                          | PROFESSIONAL<br>KANSAS MAPPER   |                          | KANSAS GIS DESIGNATION  |

### BASIC INFORMATION

NAME: _____		
TITLE: _____		
JURISDICTION/FIRM: _____		
WORK PHONE: _____	HOME PHONE: _____	
MAILING ADDRESS – STREET: _____		
CITY: _____	STATE: _____	ZIP: _____

**EMPLOYMENT HISTORY**

PRESENT OR MOST CURRENT EMPLOYER:

STREET:

CITY: STATE: ZIP:

TYPE OF BUSINESS: YOUR POSITION AND/OR TITLE:

EMPLOYMENT PERIOD: LIST YOUR PRINCIPLE DUTIES:  
FROM: TO:

OTHER MAPPING RELATED EMPLOYMENT:

STREET:

CITY: STATE: ZIP:

TYPE OF BUSINESS: YOUR POSITION AND/OR TITLE:

EMPLOYMENT PERIOD: LIST YOUR PRINCIPLE DUTIES:  
FROM: TO:

OTHER MAPPING RELATED EMPLOYMENT:

STREET:

CITY: STATE: ZIP:

TYPE OF BUSINESS: YOUR POSITION AND/OR TITLE:

EMPLOYMENT PERIOD: LIST YOUR PRINCIPLE DUTIES:  
FROM: TO:

**EDUCATION**

HIGH SCHOOL GRADUATE/GED CERTIFICATE YEAR GRADUATED:  
YES  NO

HIGH SCHOOL NAME & LOCATION:

MAJOR INTERESTS & ACTIVITIES:

VOCATIONAL/TECHNICAL SCHOOL & LOCATION:

HOURS COMPLETED: YEAR GRADUATED:

AREA(S) OF STUDY:

COLLEGE OR UNIVERSITY:

SEMESTER HOURS COMPLETED: YEAR GRADUATED:

AREA(S) OF STUDY:

LIST MAPPING, APPRAISAL OR GIS RELATED COURSES SUCCESSFULLY COMPLETED AND DATES OF COMPLETION. ATTACH COPIES OF CERTIFICATES OR OTHER DOCUMENTS AS EVIDENCE OF SUCCESSFUL COMPLETION OF THE LISTED COURSES.

COURSE TITLE	DATE

**AFFILIATIONS**

LIST NATIONAL & INTERNATIONAL PROFESSIONAL MAPPING, APPRAISAL OR GIS RELATED ORGANIZATIONS OF WHICH YOU ARE A MEMBER. ENCLOSE COPIES OF MEMBERSHIP CERTIFICATES.