SEI Code of Professional Conduct Commitment Form for Individuals

Each individual who wishes to become authorized or certified must complete this form before they are permitted to attend an advanced training class or receive formal authorization for certification. If you have questions, please send email to **partner-info@sei.cmu.edu**.

Your Information		
Last Name (Family Name)	First Name (Given Name)	Middle Name

Phone Number	Email Address

Primary SEI Partner Sponsor Organization

SEI Specializations

CERT Information Security   Insider Threat

Commitment

I am committed to the [Code of Professional Conduct](#) for SEI Services (the Code). I understand that by making this selection, I am agreeing to abide by the Code for all of my current and future SEI authorizations and/or certifications.

I am NOT committed to the Code of Professional Conduct for SEI Services (the Code). I understand that by making this selection, I am not agreeing to abide by the Code. I further understand that my SEI authorizations, certifications, and/or candidacies will be discontinued with 30 days' notice.

Signature	Date

Please sign and return this form via email to **partner-info@sei.cmu.edu**.