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Review Panel Section

Thank you for your interest in becoming an American Cheese Society Certified Cheese Professional. Before completing this application, please make sure you have reviewed the deadlines, dates, fees, and eligibility requirements on the webpage [here](#).

NOTE: ONCE YOU START THE APPLICATION, YOU ARE NOT ABLE TO SAVE YOUR PROGRESS AND RETURN AT A LATER DATE. PLEASE REFER TO THIS PDF FOR THE QUESTIONS ASKED IN THIS APPLICATION AND ONLY BEGIN WHEN YOU ARE PREPARED TO COMPLETE IT.

Choose below the exam you're applying for:*

- Certified Cheese Professional

Please type your full name below to confirm that you are completing this application for yourself.*

Name*

Name is required

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- Career Center



For the below, we recommend putting your work email as well as a personal email, on the off chance you leave your position and we need to contact you.

Email

Preferred*

Preferred is required

Secondary

The below address will be used to mail your patch and pin if you pass the exam.

Address - Preferred*

Address - Preferred is required

Phone

Preferred*

Preferred is required

Organization*

- ACS Store
- CCP Review Panel
- CCSE Review Panel



Education & Work Experience Information

Please check the below box to certify that you have your high school diploma or GED. If you don't have a high school diploma or GED, please do not continue with the application, and email jpng@cheesesociety.org for next steps.*

Yes, I have my high school diploma or GED.

Which school or institution is your high school diploma or GED from?*

Year you earned your High School Diploma or GED:*

Total Hours Working in Cheese over the last 6 years (from 2017 to the date you submit your application for the 2023 exam):*

Total Hours of Cheese Education over the last 6 years (from 2017 to the date you submit your application for the 2023 exam):*

Where You Currently Work

Employer*

Address of Employer/Work Location*

Phone Number of Employer*

Position*

Start Date of Employment*

Name of supervisor who can confirm your employment dates:*

Total Number of Hours Worked at this job:*

Describe your job duties and responsibilities:*

Below you will upload a resume detailing your work experience and any cheese education classes or courses you have undertaken. Please include the following information for each job on your resume:

Work Experience

- Employer:
- Address of Employer/Work Location:
- Phone Number of Employer:
- Position:
- Start Date of employment:
- End Date of employment:
- Name of Supervisor who can confirm your employment dates:
- Total Number of Hours Worked at this job:
- Describe your job duties and responsibilities:

Cheese Education

- Title of Class/Course:
- Instructor/Institution:
- Date of class/course:
- Number of hours of instruction:

Resume:*



Attestations

STATEMENT OF UNDERSTANDING

I declare that all the information I have provided is true to the best of my knowledge. I understand that ACS reserves the right to verify any or all information on this application or in connection with my credential. Therefore, I understand and agree that my failure to provide information that is true, respond to authorized ACS requests for additional information or abide by ACS policies and procedures shall constitute grounds for rejection of my application or denial or revocation of my credential.

*

- I agree to the statement of understanding.

AGREEMENT, WAIVER & RELEASE

I hereby submit this Application to the American Cheese Society (ACS) in accordance with and subject to its rules, bylaws, and procedures.

- I understand that the information gathered in the certification process may be used by ACS for statistical purposes in evaluation of the certification program.
- I further understand that ACS will use reasonable efforts to keep the information in its possession confidential, but that names of candidates who are awarded certification will be made public, and will be listed on a public database of ACS Certified Cheese Professionals® unless you specifically instruct us not to use your name.
- I understand that ACS reserves the right to verify any or all of the information associated with or required by this application, and that providing false or misleading information, omitting required information, or otherwise violating the rules governing certification may constitute grounds for the rejection of this application, revocation of certification, or other appropriate disciplinary action.



- I further understand that the ACS Certification is issued by ACS of Denver, CO and that I maintain my certification in good standing by complying with any and all trademark usage regulations, and all other recertification requirements that are forthcoming as incorporated in ACS bylaws and instituted by the ACS Officers and/or Board of Trustees.
- I understand that I can be disqualified from taking or completing the examination, or from receiving examination scores, if ACS determines through either proctor observation or statistical analysis that I have engaged in collaborative, disruptive, or other inappropriate behavior during administration of the examination.
- I agree that I shall only use ACS trademarks and other intellectual property in accordance with policies developed by ACS and agree to cease using such intellectual property upon expiration, suspension, resignation, or termination of my certification.
- I understand and agree that ACS makes no claims or warranties regarding my competence, and I agree not to misrepresent my certification status or meaning in any manner that suggests otherwise. I hereby irrevocably assign to ACS all right, title, and interest in and to this application.
- I agree to release and hold harmless individually and collectively the officers, directors, members, employees, and agents of ACS and the American Cheese Society (ACS) for any decision, action, or omission in connection with this application or the examination; for the failure of ACS to grant certification; or for the revocation of certification.
- I hereby authorize ACS to make inquiries regarding my fitness for certification and authorize any persons or entities contacted by ACS to respond to such inquiries and provide copies of any relevant and non-confidential information to ACS.

I understand that I may appeal any decision by ACS or its proctors. I understand that failing the exam is not grounds for an appeal.

*

I agree to the waiver and release listed above.

Choose the option below.*

CCP Application Fee - \$35.00

Note: This fee is for the application. If you are approved to take the exam, you will then need to pay the exam fee.

Submit

Payment

Total: \$35.00

How would you like to pay?

Select pay option

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Payment

Total: \$35.00

How would you like to pay?

Select pay option

Select pay option

Pay now

Invoice me

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Confirmation

Thank you!

Your application has been submitted. You will hear from us within 30 days.

Finish

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