Appendix to the application for certification as innovation management professionals at RISE

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| Name |  | | |
| Personal Public Service number (PPS) | |  | |
| Employer |  | | |
| Period of employment | Start:  Finished: | | Example : 10/10/2024  Example: Ongoing |

This certifies that the applicant has practical experience from at least 3 years of relevant work experience.

Experience in a relevant work setting refers to work within at least three of the six areas of responsibility and activities set out in the certification rules, Appendix 1 (Job description) and (listed below). At least 50% of the total time spent working must be in a qualifying area.

The person issuing the certificate/certifying the CV must be able to vouch for the contents of the certificate/CV. This means

that RISE or a RISE partner must be able to contact the issuer of the certificate in order to obtain additional information.

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| Justification |
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**Job description:**Areas of responsibility and activities

1. To lead development and continuous update of the organization’s innovation vision and strategy in coordination with key stakeholders

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| Justification |
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1. To lead development and the continuous update of the organization’s innovation process(es) in coordination with key stakeholders

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| Justification |
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1. To lead development and the continuous maintenance of an inventory of innovation methods and tools, including idea management systems, idea generation methods, staff training programs, and internal networking initiatives

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| Justification |
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1. To plan, execute/coach and follow-up innovation initiatives/projects to search for new opportunities, or to strengthen of existing operations and/or business

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| Justification |
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1. To establish relationships with external stakeholders and potential partners within the academia, government, industry and other relevant organizations

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| Justification |
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1. To promote an innovation friendly organizational culture supporting experimentation, open communication, empowerment, autonomy and a tolerance for failure

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| Justification |
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| **Date, signature** |
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| **Clarification of name** |
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| **Professional reference / manager** |
|  |
| **Company and telephone number, as well as relation to the applicant** |
|  |
| **Email to the certifier** |