



Accredited Payments Risk Professional

NACHA – The Electronic Payments Association

Accredited Payments Risk Professional Certification

Your accreditation as a payments systems risk professional both propels your business forward and provides you with recognition throughout the payments industry. An APRP is an individual who has demonstrated a comprehensive knowledge of risk management strategies, concepts and mitigation techniques within the payments ecosystem. The certification esteems itself to identify those individuals who are competent in risk across payment channels at an enterprise level.

Exam Dates: Monday, July 1 – Saturday, July 20, 2019

The exam will cover the following areas:

- Fundamentals of Payments Risk Management
- Payment Systems
- Payments Risk Policy & Governance
- Payments Risk Management Systems and Controls
- Physical and Information Security
- Regulatory Environment

APRP Certification Propels Your Business & Career Forward

Becoming an APRP will help you to advance both your financial institution as well as your career. Having an APRP employee shows examiners that your Financial Institution is committed to risk management and regulatory compliance. As an APRP, you can rest assured that you will rise above the rest by exemplifying that you are committed to your payments-related profession and helping your employer remediate risk.

APRP Prep Series: PAR/WACHA has created a comprehensive APRP Prep Series that includes seven webinars that cover the details one needs to know for the APRP Certification Exam and learn all about payments risk. Classes begin April 17th, 2019 and run most Wednesdays through mid-June.

APRP Prep Series Order Form

Yes, I would like to purchase: (choose one below)

Member – APRP Prep Series for \$650

Non-member – APRP Prep Series for \$1300

Organization _____

Name _____

My email address is _____

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Bill me as follows: (choose one below)

Please send us an invoice and we will pay by check upon receipt of the invoice

Please ACH debit our account for \$_____ as follows:

ABA # _____ Account # _____ (no G/Ls please)

Signed _____ Dated _____

Copy and return this form via fax to WACHA at (262) 345-1246