

# Solar Thermal Installer Certification APPLICATION FORM

Please refer to the Candidate Information Handbook for complete instructions & policies.

Please refer to <a href="https://www.nabcep.org">www.nabcep.org</a> for the latest exam date and application deadlines.

NABCEP encourages applicants to apply electronically at <a href="https://forms.nabcep.org">https://forms.nabcep.org</a>

Please type or print all information.

	1. PERSONAL INFORMATION						
Last Name	First	Middle	Suffix				
Mr.□ Mrs.□ Ms.□	Birth Date (mm/dd/yyyy)//	Gender: N	Male				
Mailing Address: Street	Address or P.O. Box						
Address line 2							
City	State	Zip Code 0	Country				
Residence Address (If di	ifferent than mailing address above): Str	reet Address or P.O. Box					
Address line 2							
City	State	Zip Code (	Country				
Primary Phone Number		Fax Number					
Alternate Phone Number							
Alternate Priorie Number		May NABCEP contact you via email with reminders and information about your certification? NABCEP					
E-Mail Address		will not sell email addresses under any circumstances.  Yes, send me email No					
	: Have you used, been known as, or ca as) other than the name signed to the a						
Last Name	First name	Middle	Dates Used				
2.							
3.							
	2. BUSINESS INF	ORMATION					
Do you Own your Renev	wable Energy Business? Yes 🗌 N	No  If yes, please provid	de your Business info below.				
Business Name(s) and/or DI	BA(s) used past or currently:	Business Incorporation	or other Effective Date:				

3. PR	IOR AND EXISTI	NG LICENSES	, CERTIFICAT	TIONS AND REGISTRATIONS	
If you currently or previously have held business or professional license(s), certification(s) or registration(s) in any jurisdiction, please list them below. Copy this section and attach the copy if you need additional space.					
License, Certification or Registration Type     State or Jurisdiction			•		
Status : Active	Inactive	From (mm/dd/yyyy	<u> </u> y)	To (mm/dd/yyyy)	
License, Certific	ation or Registration Nu	mber	Name Used		
2. License, Cer	tification or Registration	Туре	State or Jurisdicti	on	
Status : Active	Inactive	From (mm/dd/yy	yyy)	To (mm/dd/yyyy)	
License, Certific	ation or Registration Nu	mber	Name Used		
3. License, Cer	tification or Registration	Туре	State or Jurisdiction	on	
Status : Active	Inactive	From (mm/dd/yy	yyy)	To (mm/dd/yyyy)	
License, Certific	License, Certification or Registration Number Name Used				
Additio	onal licenses, certification	ns or registrations a	re identified on an a	attached page: Yes No	
		4. QUALIFY	ING CATEGO	PRY*	
categories care	fully first. Note: Applicar	nts are encouraged	to choose the categ	of the categories below. Please read ALL gory which is appropriate, and which requires in completing the Application.	
1 🗆	<b>1-b)</b> Two (2) years of e Board-recognized train	experience installing ning program; (Docu ning. For definition o	Solar Pool Heating Iment 4 installs + in	Systems (document 8 installs); <b>OR</b> g Systems in addition to completion of a clude certificates or info for 40 hours of d training" see sections 3.2.3 thru 3.2.5 of the	
Two (2) years of experience installing Solar Thermal Systems in addition to completion of a Board-recognized training program; (Document 4 installs + include certificates or info for 40 hours of Board-recognized training. For definition of "Board-recognized training" see sections 3.2.3 thru 3.2.5 of the Candidate Handbook.) <i>OR</i>					
Be an existing licensed contractor in good standing in solar or construction-related areas with one (1) year of experience installing Solar Thermal Systems. (Document 2 installs and include information for active contractor's license: photocopy, license number, etc.) <i>OR</i>					
Four (4) years of HVAC, mechanical, pipe-fitting or plumbing-related experience working for a licensed contractor, including one (1) year of experience installing Solar Thermal Systems; (Document 2 installs and include or have sent an employer reference for 4 years experience.) <i>OR</i>					
5 🗌	Three (3) years experience in a government/trade union-approved construction trade apprentice program, including one (1) year of experience installing Solar Thermal Systems; (Document 2 installs and include proof of diploma.) <i>OR</i>				
6 🗆		dited educational ins	stitution plus one (1)	or renewable energy technology/technician year of experience installing Solar Thermal a or transcript.) <b>OR</b>	

Applicant N	name:
7 🗌	Four (4)-year engineering degree from an accredited educational institution, including (1) year experience installing Solar Thermal Systems; (Document 2 installs and include copy of diploma or transcript.) <i>OR</i>
8 🗌	NABCEP© PV Solar Installer Certification AND 16 hrs. Board-recognized training AND include installation of at least two solar hot water systems. These two systems require permitting and inspection process by a permitting authority OR in the absence of such, an appropriate underwriter authorized to provide an inspection certificate. In regions where neither of these inspection options exist, the Application Review Committee will judge experience based on supplied documentation.

Note: For these purposes, experience installing Solar Thermal systems requires one year in a responsible role on the job installing Solar Thermal systems, in the role of foreman, supervisor, site manager, or experienced worker performing Solar Thermal installation work without direct supervision. **Each year of experience requires an** average of 2 installations. For example, if you are applying under category 'A', you must list 8 installations.

1	. VERIF	ICATION	OF EM	PLOYMEN	T AND EXPERIENCE		
Hands-on experience is required for certification. Please document employment in a manner to demonstrate sufficient experience for the qualifying category (Section 4 of this Application) you have selected. For the purposes of certification, one (1) year of experience = one year in a responsible role on the job installing Solar Thermal systems, in the role of foreman, supervisor, site manager, or experienced worker performing solar thermal installation work without direct supervision. Each year of work in the solar thermal field must include the installation of at least two solar hot water systems or pool heating systems (depending upon your category.) See Section 6 of this application to document compliance with this requirement.							
responsibilities and # of/	type of syste	ms installed	. In additio	n, a supervisor	ent and include a job descriptior will need to sign off on your curn escription of your work and sign	rent employment	
The <b>Candidate Informa</b>	tion Handbo	ook Section	3.3 contain	s additional info	ormation on filling out this emplo	yment history.	
Employer Business I	Name:						
Address			Ci	ty	State	Zip Code	
Dates Employed (mm/d	d/yyyy):				Estimated # of installs		
From: /	/	To:	1	/	in which you participated:		
Your Supervisor:				Telepho	ne Number:		
Provide a description of your duties and supervisory responsibilities. If your position changed during this employment, list dates for each position, beginning with your current or most recent position. Describe your duties, including the type and number of systems installed and your role in the installations. Use additional sheets if necessary.							
In addition, a supervisor If you are or were self-er					Please attach a letter from your so your work.	supervisor.	
Self-employment Verindividual.	rification:	I performed	solar instal	ation work in th	e job described above as a self	-employed	
Signature				Da	te		

Applicant Name:
5. VERIFICATION OF EMPLOYMENT AND EXPERIENCE – Continued
Copy this page as peeded to document your employment history covering the time period required for the Qualify

5. VERIFICATION OF EMPLOYMENT AND EXPERIENCE – Continued							
Copy this page as needed to document your employment history covering the time-period required for the Qualifying Category (see Section 4 of this Application Form) by which you are qualifying to sit for the NABCEP exam and certification.							
Employer Bu	siness Na	ame:					
Address				City	State	Zip Code	
Dates Employe	d (mm/dd/	уууу):				Estimated # of installs	
From:	/	/	To:	/	/	in which you participated:	
Your Superviso	r:			Te	lephone Nur	mber:	
Provide a description of your duties and supervisory responsibilities. If your position changed during this employment, list dates for each position, beginning with your current or most recent position. Describe your duties, including the type and number of systems installed and your role in the installations. Use additional sheets if necessary.  Employer Business Name:							
Address				City	State	Zip Code	
Dates Employe	d (mm/dd/	уууу):				Estimated # of installs	
From:	<u>/</u>	/ To	<u>: /</u>	/		in which you participated:	
Your Superviso	r:			Te	lephone Nur	mber:	
position, beginnin	g with your o		cent position. De	escribe your di		ed during this employment, list dates for each g the type and number of systems installed and	

	2. SOLAR THERMAL INSTALLATION REQUIREMENT						
required under the qualifying subject to a complete permappropriate underwriter au	Certification requires that you install at least two Solar Thermal installation projects for each of the years of experience required under the qualifying category you chose in Section 4 of this Application. Each installation must be a system subject to a complete permitting and inspection process by a permitting authority – OR, in the absence of such, an appropriate underwriter authorized to provide an inspection certificate. In regions where neither of these inspection options exist, the Application Review Committee will judge experience based on supplied documentation.						
work listed in this section. system, attach letters from listed, or other documental	NABCEP reserves the right to contact system owners/operators, permitting authorities, and responsible contractors to verify work listed in this section. Attach copies of any permits or inspection certificates acquired. Optional: attach a photo of the system, attach letters from customers, design plans, a letter from your employer asserting that you performed the work listed, or other documentation. If a license for solar installation is required in the jurisdiction in which the work is performed, candidates must submit their license number or the license number under which the work was performed.						
The <b>Candidate Information</b> installation requirement.	on Handbook Section 3.4 has additional information on	documenting the solar thermal					
Dates Job Performed (mm/yyyy)	a) Job Location Physical Address: Address	City State Zip					
From:	b) System owner/operator Contact Info: Name	Phone Number					
То:							
Total System size: : in kW (Use 1kW per 10 sq. ft of collector space-for approx. purposes only)	c) System Components: # and size of collectors, so	olar tanks, etc.					
Is the system for hot water or pool heating?	d) Permitting and Inspection Authority: (attach COI Jurisdiction Permit/job number Date	PIES of any permits or inspection certificates) County Lot# (if required for Permit)					
If no permitting or inspecting authority was available, check here and explain at right: □	kplanation of lack of permitting or inspection opportunity	v (if applicable):					
e) Responsible contract Name	<b>or, installer or business</b> (if different from applicant) Phone Number						
Description of work performed by applicant, number of workers supervised, and level of responsibility:							
List of documentation attached:* See Candidate Information Handbook Section 3.4 for details on acceptable documentation.							
Copies of permit(s) (I		umentation (please describe below):					
☐ Copies of inspection certificate(s) (list # attached) ☐ Optional photo of the system (list # attached)							
	n customers (list # attached)						
Optional design plans (list # of pages attached )							

Optional employer verification letter(s) (list # attached \_\_\_\_\_)

Appli	cant Name:	

6. SOLAR THERMAL INSTALLATION REQUIREMENT Continued					
See instructions on pr	revious page, and in Section 3.4 of the need		ation Handboo	k. Copy this pag	je as
Dates Job Performed (mm/yyyy)	a) Job Location Physical Addres	ss: Address	City	State	Zip
From:	b) System owner/operator: Name	Δ		Phone Number	
То:	by System Switch Sperator. Name			Thore Number	
Total System size: : in kW (Use 1kW per 10 sq. ft of collector space-for approx. purposes only)	c) System Components: # and s	ize of collectors, sola	ar tanks, etc.		
Is the system for hot water or pool heating?	d) Permitting and Inspection Au Jurisdiction Permit/job number		ES of any permits County	or inspection certing Lot# (if required for	
If no permitting or inspecting authority was available, check here and explain at right: □	Explanation of lack of permitting or ins	oection opportunity (i	f applicable):		
e) Responsible contrac Name	tor, installer or business (if different	from applicant): Phone Number			
	formed by applicant, number of w				ontation
	ched:* See Candidate Information Ha			•	
	(list # attached)	<del></del>	nentation (ple	ase describe be	elow):
	certificate(s) (list # attached	)			
	e system (list # attached)	`			
	m customers (list # attached				
	ns (list # of pages attached)				
Optional employer v	erification letter(s) (list # attached	)			

<b>Applicant Name:</b>	
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## 3. EDUCATION AND/OR APPRENTICESHIP (for entry options 1-b, 2, 5, 6, 7,8)

If your Qualifying Category requires education, copies of official transcripts or diplomas attesting to your attendance and degrees earned will need to be attached to the application form. For the purposes of certification, NABCEP will accept training to meet entry requirement option (b) when the training meets the following outcomes:

- c) a minimum of 16 or 40 hours (depending upon category) cumulative (can include product training, etc.)
- d) formal supervised training format (with a teacher-learner structure)
- e) covers core competencies from the Solar Thermal Installer Task Analysis, and OSHA safety standards relevant to solar thermal installation (or Canadian equivalents for Canadian nationals).

	Complete at least 16 hours of training. List training courses completed along with Contact hours for each (teacher-learner class time). Attach transcripts and/or proof of attendance.			
Entry Option1-b Entry Option 8				
	Total Contact Hours Completed:			
	Complete at least 40 hours of training. List training courses completed along with Contact hours for each (teacher-learner class time). Attach transcripts and/or proof of attendance.			
Entry Option 2				
	Total Contact Hours Completed:			
Entry Option 5	Attend a government or trade union-approved construction trade apprentice program for at least 3 years. Indicate apprenticeship program sponsor and give a program description and dates. Attach proof of completion.			
Entry Option 6	Two-year construction-related, or engineering technology, or renewable energy technology/technician degree from an accredited educational institution. Indicate institution and degree earned (dates) and attach proof of completion.			
Entry Option 7	Four year engineering degree from an accredited educational institution. Indicate institution and degree earned (dates) and attach proof of completion.			
4. SPECIAL ACCOMMODATIONS REQUESTS				

Are you requesting special testing accommodations for a disability or religious observance? Yes \( \) No \( \)

If you answered yes, please complete the Request for Special Exam Accommodations Form (in the *Candidate Information Handbook*) and attach it to your application. Please refer to Section 5.3 of the *Candidate Information Handbook* for details.

### 5. PAYMENT INFORMATION

Please complete the following PAYMENT REMITTANCE FORM in the amount of \$50 U.S., a nonrefundable Application Fee.



## PAYMENT REMITTANCE FORM

Please fill in the following boxes **EXACTLY** as shown on your current application. Illegible, incomplete or missing information will delay or prevent processing.

1. IDENTIFICATION INFORMATION								
Last Name	First		Middle Suffi					
Current Mailing Address: Street Address or P.O.	Ourse of Mailing Address of Otre of Address on D.O. Day							
-	. БОХ							
Address line 2								
City	State		Zip Code	Country				
Phone Number	E-Mail Ac	Idress						
	2. FEES	(check	one)					
_		·						
\$50 Application fee								
\$200 First time exam fee		□ \$	150 for 2nd or 3 <sup>r</sup>	d time taking t	he exam			
\$200 Recertification Application fee \$50 Late fee for Recertification between 30 to 90 days of expiration				30 to 90 days				
Check or money order payable to NABCE	<b>₽</b> .							
☐ VISA								
☐ Mastercard								
Name on card:	:	Signature	e of cardholder:					
M M / Y Y Credit Card number (do not u	use spaces	or dashe	es)					
3.	Signatui	re and I	Date					
I affirm that the information I have provided in this f card charge.	form is corr	ect and I	authorize NABCEP	to proceed with th	ne above credit			
Signature:								
Date:								
Send th	nis form	and Pa	yment to:					
NABCEP		Fax: (407) 264-2855						
Saratoga Technology & Energy Pa 10 Hermes Road, Suite 400 Malta, NY 12020	ark	Email: Nabcep@proftesting.com						

For Official Use Only:

Received:

Processed:

Authorization Code:

### 6. CODE OF ETHICS

The Code of Ethics of the Photovoltaic Practitioner requires certificants to uphold professional standards that allow for the proper and ethical discharge of their responsibilities and maintain the integrity of the credential. Through the establishment of the Code of Ethics, the NABCEP Board of Directors seeks to assure the highest standards of behavior and principles in the renewable energy and energy efficiency industries. For a copy of the complete Code of Ethics, See Appendix II of the *Candidate Information Handbook*. As a certificant, I agree to uphold and abide by the NABCEP Code of Ethics. I will:

- deal with all clients, consumers, and other professionals and professional organizations fairly and in a timely manner:
- provide safe and quality services to clients and consumers;
- respect and promote the rights of clients and consumers by offering only professional services that I am qualified
  to perform, and by adequately informing clients and consumers about nature of proposed services, including any
  relevant concerns or risks:
- maintain the confidentiality and privacy of all client and consumer information;
- avoid conduct which may cause a conflict with client or others;
- engage in moral and ethical business practices, including accurate and truthful representations concerning professional information and system performance expectations;
- be truthful with regard to research sources, findings, and related professional activities;
- maintain accurate and complete business and professional records;
- · respect the intellectual property and contributions of others;
- further the professionalism of renewable energy industry services; and,
- behave in a courteous and professional manner when communicating with NABCEP representatives.

## 7. AGREEMENT, ATTESTATION OF ACCURACY, AND RELEASE

By signing this agreement below, I represent and agree to the following terms, conditions, and releases related to the North American Board of Certified Energy Practitioners, Inc., (NABCEP) and the Solar Thermal Installer Certification:

- I understand and accept all NABCEP certification policies, procedures, and requirements. I agree to satisfy, and conduct myself in accordance with, all NABCEP policies and procedures, and any decisions or policies issued by the NABCEP Board of Directors or its authorized representatives, as currently constituted and as amended.
- I agree that if NABCEP determines that my compliance with a NABCEP policy, procedure, other requirement, or any of the terms of this agreement requires or includes an explanation, additional information, and/or supporting documents, I will provide a complete and accurate response and true copies of the materials to NABCEP in a timely manner. I agree that any refusal or failure to provide true, timely, and complete responses to questions in this application, renewal forms, or to other NABCEP requests for information may lead to further investigation, and/or sanctions by NABCEP Board of Directors, including the denial or revocation of a certification.
- 3. I agree that the NABCEP has the right to communicate with any person, government agency, or organization to review or confirm the information in this certification application or any other information related to my application or Solar Thermal Installer Certification. I agree that NABCEP may investigate my professional standing. Further, I agree to, and authorize the release of, any information requested by NABCEP for such review and confirmation.
- 4. I agree that all materials that I submit to NABCEP will become the property of NABCEP, and that NABCEP is not required to return any of these materials to me.
- 5. I agree to notify NABCEP in a timely manner, of any changes concerning the information I have provided, including address and telephone number information.
- 6. I agree that information related to my participation in the NABCEP certification process may be used in an anonymous manner for research purposes, and for other lawful purposes authorized by the Board of Directors.
- 7. I agree that upon designation as a Certified Solar Thermal Installer by NABCEP, my professional contact information will be considered public information and may be made available to the public upon request.
- 8. I agree that my Solar Thermal Installer Certification does not imply licensure or registration.
- 9. I agree and accept that I shall not engage in any form of dishonest behavior with regard to the Solar Thermal Installer Certification examination. I understand that such dishonesty includes, but is not limited to, the following: using unauthorized materials to complete my Solar Thermal Installer examination; copying the work of another candidate or other individual, or representing another candidate's or other individual's work as my own work; having another individual take or otherwise assist me in completing the examination; providing unauthorized

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Applicant Name:	

materials or information to others during the examination; and any other activity which may provide me or another candidate with an unfair advantage. I agree and accept that all communications, written, oral or otherwise, during the Solar Thermal Installer examination are forbidden, as is the use of any outside notes, books, calculators or other material in any form other than those provided by NABCEP for use during the examination itself.

- 10. I understand and accept that the contents of all NABCEP test and examination related information and materials shall be held strictly confidential, and that the entire ownership interest in this information and materials is held by NABCEP and controlled by the NABCEP Board of Directors. I understand and accept that my possession of any test and examination related information is for the sole purpose of taking the Solar Thermal Installer Certification examination, and that no other person, group of individuals, corporation, or other entity shall have any license or permission to use any test and examination related information. I agree not to discuss, share, distribute, reproduce in any manner, or otherwise disclose the specific content of the Solar Thermal Installer test questions, answers, and examination related information and materials to any individual or organization.
- 11. I understand and accept that, in appropriate circumstances as determined by the NABCEP Board and its representatives, NABCEP reserves the sole and exclusive rights to: suspend, cancel, revoke, or otherwise terminate any eligibility, certification decisions, and any rights or privileges related to the Solar Thermal Installer Certification process; and, suspend or terminate candidate examination privileges, exam scoring, or other test evaluation activities. Among other circumstances, the suspension or termination of examination or other privileges, and the issuance of remedial and/or disciplinary actions, will be authorized, where: a specialty certification application or testing irregularity or impropriety occurs; a candidate or Certified Solar Thermal Installer engages in misconduct or other conduct contrary to NABCEP policies and requirements; or, certification eligibility information or testing scoring or evaluation results are determined to be invalid for any other reason.
- 12. I agree that all disputes relating in any way to my Solar Thermal Installer application and examination will be resolved solely and exclusively by means of NABCEP policies, procedures, and rules, including the NABCEP Certification Appeals Procedures.
- 13. I certify that the information I have provided with respect to this application is accurate and complete. I understand that any misrepresentations or incorrect information provided to NABCEP can result in discipline or sanctions, including certification ineligibility, suspension, or revocation.
- 14. I release, discharge, and indemnify NABCEP, its directors, officers, examiners, employees, attorneys, representatives, and agents from all liability and claims that may arise out of, or be related to, my professional practice and related activities.
- 15. I release, discharge, and indemnify NABCEP, its directors, officers, examiners, employees, attorneys, representatives, and agents from any actions, suits, obligations, damages, claims, or demands arising out of, or in connection with, this application, NABCEP examination activities, or any other action taken by the NABCEP Board of Directors and NABCEP with regard to its certification activities, including, but not limited to, all actions related to ethics policies and matters. I understand and agree that any decision concerning my qualifications and eligibility for any specialty certification, and my continuing qualification for any specialty certification, rests within the sole and exclusive discretion of the NABCEP Board of Directors and that these decisions are final.

#### I fully understand and agree to each and all of the terms set forth above.

Signature:	Da	te:
Printed Name:		

Send Application form and Payment to:
NABCEP
Saratoga Technology & Energy Park
10 Hermes Road, Suite 400
Malta, NY 12020

Phone: (800) 654-0021 • Fax: (518) 899-1092

#### 8. INSTRUCTIONS

Your application form should be postmarked by the date marked on the first page of this application form.

Your application form needs to be complete at the time it is submitted, containing all attachments and photocopies required.

Do not send pieces under separate cover.

You will be notified that your application has been approved approximately 5 weeks prior to the exam.

Please call NABCEP if you have not received notification of approval or denial of eligibility to sit for the Exam, and your Exam Scheduling Form, at 4 weeks prior to the exam date.

Solar Thermal Installer Application Checklist
Did you accurately complete the Personal Information Section of the Application Form?
Did you select the Qualification Category option that best describes your experience?
Did you attach a letter signed by your current supervisor (unless you are self-employed)?
Did you attach copies of permit(s) for installations listed?
Did you attach copies of inspection certificate(s) for installations listed?
Did you attach <i>optional</i> documentation for installations listed (such as letters from the customer, photos, design plans, a letter from your employer, etc.)?
Did you submit copies of transcripts or diplomas for any training, education and/or degrees required for the Qualifying Category you have selected?
Did you attach the Special Testing Accommodations Form if you desire special accommodations?
Did you put your NAME at the top of each page of the application?
Did you put your NAME at the top of each attachment?
Did you read the Code of the Ethics and sign Agreement that follows it?
Did you make a COPY of the entire application form and supporting documentation?
Have you enclosed your \$50 non-refundable fee?

#### STATEMENT OF NONDISCRIMINATORY POLICY

The North American Board of Certified Energy Practitioners is dedicated to the principles of equal opportunity and equal access to its programs and services. NABCEP does not discriminate against any individual on the basis of religion, gender, ethnic background, nationality, disability, sexual orientation, or other reason prohibited by law. NABCEP grants certification without regard to an applicant's membership or non-membership on any organization, association or other group.

#### STATEMENT OF CONFIDENTIALITY POLICY

Unless authorized by NABCEP policy or practice, NABCEP will take all reasonable precautions to ensure that candidate application information will not be released to 3rd parties.

NABCEP Saratoga Technology & Energy Park 10 Hermes Road, Suite 400 Malta, NY 12020

Email: info@nabcep.org

Phone: (800) 654-0021 Fax: (518) 899-1092

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