

INSTRUCTIONS

The applicant must complete both Sections A and B of this form and then forward the form to the respondent, who is to use Section C to verify the statements made in Section B. See the *Craftsman Workbook* for complete instructions. Make photocopies of this form as necessary. **If you are seeking a waiver of the performance exam, you must provide a copy of Form D16 to each applicable respondent.**

SECTION A - to be completed by the applicant

1. Name of Applicant _____ Social Security No. _____
Address _____ City _____ State _____ Zip _____
Employer _____ Phone _____ Home **G** Work **G**

SECTION B - to be completed by the applicant

2. Employer (during time period in question) _____
From _____ to _____ Total _____ Job title or description _____
 month & year month & year Net # of months
Employer Address _____ City _____ State _____ Zip _____

3. Name of Respondent verifying work experience _____ Title _____
During this time period, the relationship of the respondent to myself (applicant) was:
G Supervisor **G** Employer **G** Other--Please explain _____

4. List the percentage of time spent in concrete finishing related work:
____% Concrete placement and consolidation
____% Finishing and jointing
____% Curing and protection
____% **TOTAL** Note: 100% means you worked strictly as a full-time employee (40 hours) with concrete finishing related work as your only responsibility. Less than 100% means your weekly time spent in concrete finishing related work, averaged over your period of employment, was less than 40 hours. This condition would exist if you had divided responsibility between concrete finishing and non-concrete finishing related work; OR, you worked solely on concrete finishing related work, but less than full time OR not steadily during the time period.

I authorize those whom I have given as references to furnish to the American Concrete Institute or its agents information concerning my work experience and other background relevant to the stated requirements of the American Concrete Institute certification programs. I agree to release and hold harmless any individual, company or institution, including the American Concrete Institute, and any persons connected therewith from liability imposed by law in furnishing such information.

I understand that untruths or misrepresentation contained herein constitute grounds for denial of certification.

Signature of Applicant

Date

Print Name

SECTION C - to be completed by the respondent

To the respondent: Please examine all of the information provided by the applicant in Section B. You are being asked to verify work experience in order for this applicant to meet qualifications for certification as an ACI Concrete Flatwork Finisher. Please note that the disclaimer signed by the applicant in Section B releases you from civil liability in regard to statements provided to the best of your knowledge about the applicant, and establishes that the applicant is freely requesting that you provide this information.

1. The information provided in Section B is:

G Correct as stated

G Correct as modified

Take note of stated dates and time periods, job responsibilities, etc., and correct any and all inconsistencies and ambiguities by writing in corrections in Section B.

2. In the time period listed in section B, #2, I would characterize the applicant's job performance as:

G Satisfactory

G Unsatisfactory

G No Opinion

NOTE: If any box other than "satisfactory" is checked, explain reasons in detail below.

3. Comments _____

I have honestly evaluated the information being submitted on this form by the applicant. I have supplied whatever modifications may have been necessary to make all statements herein conform to the truth, to the best of my knowledge. I submit this form in the belief that it contains no misrepresentations whatsoever.

Signature of Respondent

Date

Print Name

Title

Present Employer

Employer Telephone

Summary of Respondent's Qualifications (state your educational background, work experience, certifications and affiliations with professional organizations here):

IMPORTANT NOTE TO RESPONDENT:

The applicant should not see this form after you have filled out Section C.

Return the completed form to the applicant in a sealed envelope.