

# Addendum

## CP-50 (07)

Revisions to the work experience requirements for full certification as an ACI Tilt-Up Supervisor became effective January 1, 2010. This addendum contains the updated forms and instructions reflecting the new requirements. Please pay specific attention to the minimum number of hours in which supervisory experience must be verified for each of the ten (10) areas of tilt-up construction described on page 2 of the **ACI Tilt-Up Supervisor Work Experience Instructions** under the heading **TILT-UP SUPERVISOR EXPERIENCE AREAS**. The minimum number of hours in each category is shown in parentheses following the description.

Please use the attached forms instead of those found in the CP-50 (07) workbook.

# ACI Tilt-Up Supervisor Work Experience Instructions

Certification is valid for 5 years from the date of completion of all applicable requirements. A certified Technician may upgrade to Supervisor upon completion of the work experience requirements. If a Technician upgrades to Supervisor status, certification as a Supervisor shall be valid for the remainder of the original Technician certification period.

**Form D5 – For non self-employed applicants only; self-employed applicants use Form D17 (instructions on reverse).**

## Section A – Applicant completes

1. Use your full legal name and current address. If you are currently unemployed, use your most recent employer as you present employer. **Leave no spaces blank.** Make copies of the form after completion of Section A if you wish; **copies must be two-sided.**

## Section B – Applicant completes

2. Fill out one form for each employer, current and/or former, for whom you are submitting work experience. **Name of Respondent/Title** - Use the name and title of the person under whom you worked for the employer listed. This may be an owner, supervisor, superintendent, or manager qualified to judge your performance.
3. **A. Term of Employment** - Specify the time period (month and year) you worked for the employer listed.  
**B. On-site Construction Work** - During the term of employment provided in Step 3A, list the number of hours actually worked at construction sites. This information is counted towards the five (5) year (7500 hour) overall construction experience requirement.
4. **Tilt-Up Construction Work** - Of the hours stated in Step 3B, list the number of hours worked specifically on tilt-up projects. This information is counted towards the three (3) year (4500 hour) tilt-up construction experience requirement.
5. Of the tilt-up hours stated in Step 4, list the hours performing supervisory duties in each of the categories shown. Descriptions of the categories are listed later in these instructions. Supervisory roles include positions as Foreman, Crew Leader, or other job descriptions in which you were responsible for a particular phase of the project. Credit may be given for attendance in ACI or TCA training courses related to each specific category; for proper credit, complete information must be provided as directed on the form -- class time in each category is limited to 25% of the **per category** minimum supervisory experience requirements.
6. **Projects** - Attach a list of the projects on which you worked for the hours listed on the form. Indicate whether or not the project was constructed with tilt-up walls. Special circumstances may include very tall or heavy panels, use of off-slab or stack casting, insulated sandwich panels, or other non-standard practices.

## Section C – Respondent completes (The respondent is the person whose name appears in Section B, Step 2.)

1. Indicate the accuracy of the information in Section B.
2. Indicate whether or not the applicant's performance was satisfactory.
3. If the applicant's job performance was unsatisfactory, provide details as to why in the space provided.

Upon completion of the form place it in a company envelope with your name and the name of the applicant on the front. Return it to the applicant who will submit all required forms to the Sponsoring Group or directly to:

ACI Certification Department  
PO Box 9094  
Farmington Hills, MI 48333

January 2010

## Form D17 – Self-employed applicants only!

### Section A – Applicant completes

1. Use your full legal name and current address. **Leave no spaces blank.** Make copies of the form after completion of Section A if you wish; **copies must be two-sided.**

### Section B – Applicant completes

2. Fill out one form for each project. You must submit at least three (3) forms for 3 separate projects spanning a three (3) year period of time. The client or owner may not be personally related to you. Please provide the dates that you were employed on the construction project stated.
3. Provide information about the project as indicated. Indicate any special circumstances such as very tall or heavy panels, use of off-slab or stack casting, insulated sandwich panels, or other non-standard practices.
4. On the project stated, indicate the areas for which you were responsible for supervisory duties in each of the categories shown. Descriptions of the categories are listed later in these instructions.

### Section C – Owner or Client completes (The respondent is the person whose name appears in Section B, Step 2.)

1. Indicate the accuracy of the information in Section B.
2. Indicate whether or not the applicant's performance was satisfactory.
3. If the applicant's job performance was unsatisfactory, provide details as to why in the space provided.

Upon completion of the form place it in a company envelope with your name and the name of the applicant on the front. Return it to the applicant who will submit all required forms to the Sponsoring Group or directly to the **ACI Certification Department at: PO Box 9094, Farmington Hills, MI 48333**

### TILT-UP SUPERVISOR EXPERIENCE AREAS

Use this information to assist in completing Section B, Step 5 of the Examinee Application Form or Section B, Step 4 of the Client Affidavit – the number of hours required in each category is shown at the end of the description in parentheses:

<b>Safety</b>	All forms and aspects of site safety implementation, including clearing and grubbing, excavation, foundations, forming of panels; handling rebar; concrete placement, structural member erection, roofing, exterior treatment application, interior construction and equipment commissioning and testing. Pre-erection and/or safety meetings; personal protection and equipment training and inspections; use of tools; review MSDS sheets; daily jobsite inspections, and first aid training or recertification. <b>(400)</b>
<b>Plan Reading</b>	Reading and interpretation of structural and architectural drawings; reinforcement drawings; tilt-up panel drawings; structural steel drawings; MEP drawings for coordination; lift insert drawing; and bracing drawing. <b>(50)</b>
<b>Scheduling</b>	Scheduling the delivery and staging of all construction material; allocation of manpower and equipment; panel and steel erection; and completion of building shell. <b>(100)</b>
<b>Site Prep &amp; Foundations</b>	Reading, use, and interpretation of soils report; architectural and structural drawings; rebar shop drawings; and coordination of jobsite conditions such as overhead power lines and underground utilities. Knowledge of proper soil preparation procedures. <b>(50)</b>
<b>Slabs on Grade</b>	Reading structural and architectural plans. Knowledge and understanding of the preparation and placement of slabs on grade including blockouts, reinforcing steel, placement, finishing, and curing. Proper use of bondbreakers, hardeners and sealers. <b>(50)</b>
<b>Layout</b>	Layout of tilt-up panels; steel embeds; brace inserts; lifting inserts; layout of temporary bracing and anchorage; crane travel areas; and, storage of materials. <b>(300)</b>
<b>Forming</b>	Knowledge and understanding proper use of forming materials – wood, composites, and steel; attachment of panel forms and form liners - adhesives, screws, nails; and application of bond breakers. <b>(400)</b>
<b>Concrete Props &amp; Placement</b>	Knowledge and understanding of concrete mix design; ingredients of concrete: aggregate, cement, sand and admixtures; placement methods for concrete – pump, chute, buggy, conveyor; finishing processes and curing. <b>(200)</b>
<b>Erection</b>	Knowledge and understanding of crane capacity; layout of panels; rigging; erection hardware; safety requirements of erection; analysis of the surroundings of the erection crane; bracing components; and, lifting hardware. <b>(400)</b>
<b>Structural Systems</b>	Knowledge and understanding of the attachments of the structural systems to the tilt-up panels; removal of bracing; and various structural systems such as wood, concrete, steel, and hybrid systems; and, safety involved with the structural systems. <b>(50)</b>



**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 Tilt-Up Supervisor. 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:

- Correct as stated                       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, I would characterize the applicant's job performance as:

- Satisfactory                       Unsatisfactory                       No Opinion

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

3. Comments \_\_\_\_\_  
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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

**IMPORTANT NOTE TO RESPONDENT:**

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

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



**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 Tilt-up Supervisor. 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:

- Correct as stated                       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:

- Satisfactory                               Unsatisfactory

NOTE: If "unsatisfactory" is checked, explain reasons in detail below.

3. Comments \_\_\_\_\_  
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\_\_\_\_\_

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 here-in 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

\_\_\_\_\_  
Employer/Company

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip