

ACI Work Experience Form - For qualification to attempt recertification as an ACI Shotcrete Nozzleman by Performance Exam ONLY

1000 hours of verified work experience as a nozzleman within the two (2) years immediately prior to seeking recertification or an average of 500 hours per year within the last five (5) years immediately prior to seeking recertification is a prerequisite to participate in the ACI Shotcrete Nozzleman Recertification by Performance Exam ONLY process. Participation in this method of recertification requires that the applicant's required hours of experience as a nozzleman be documented on one or more copies of this form and submitted to the Sponsoring Group for Examiner review and verification prior to the testing session. *If 1000 hours is across 5 or more projects, use additional form(s).*

Project #1 Name		Project Location		Employer		Contact Name & Phone # for Verification	
Begin & End Date		Nozzleman Hours		Wet or Dry Mix Process		Scope of Work (Include approximate total cubic yards or Square feet placed by nozzleman)	
Project #2 Name		Project Location		Employer		Contact Name & Phone # for Verification	
Begin & End Date		Nozzleman Hours		Wet or Dry Mix Process		Scope of Work (Include approximate total cubic yards or Square feet placed by nozzleman)	
Project #3 Name		Project Location		Employer		Contact Name & Phone # for Verification	
Begin & End Date		Nozzleman Hours		Wet or Dry Mix Process		Scope of Work (Include approximate total cubic yards or Square feet placed by nozzleman)	
Project #4 Name		Project Location		Employer		Contact Name & Phone # for Verification	
Begin & End Date		Nozzleman Hours		Wet or Dry Mix Process		Scope of Work (Include approximate total cubic yards or Square feet placed by nozzleman)	

<p>I authorize those whom I have given as references to furnish to the American Concrete Institute or its agents information concerning my work experience. I agree to release and hold harmless any individual, company or institution, including the American Concrete Institute, its agents and any persons associated therewith from liability imposed by law in furnishing such information. I have honestly completed or reviewed the information being submitted on this form. 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.</p>	<p>_____ Nozzleman Applicant Printed Name</p>	<p>_____ Signature</p>	<p>_____ Date</p>
	<p>_____ Applicant's Employer - Printed Name & Title</p>	<p>_____ Signature</p>	<p>_____ Date</p>
	<p>_____ ACI Examiner</p>	<p>_____ Signature</p>	<p>_____ Date</p>