



Applicant Name _____ Certification ID/Last 4 digits of SSN _____

Address _____

Address _____ City _____ State _____ Zip _____

Business Phone _____ Email Address _____

I have been selected to serve as an ACI Examiner by _____
(Name of Sponsoring Group)

I wish to be considered for the following certification program(s): _____

My qualifications are as follows:

1. ENGINEERING EDUCATION

Name and Location of Institution	Dates of Attendance		Course (CE, ME, EE, etc.)	Degree Received or Credit Hours	Date of Graduation
	From	To			

2. EMPLOYMENT EXPERIENCE

Detail your work experience in concrete construction, testing, and inspection, beginning with the most recent. Use additional sheets if necessary.

Dates		Total No. of Months	Name and Address of Organization
From	To		

SUMMARY OF ENGAGEMENT:

Dates		Total No. of Months	Name and Address of Organization
From	To		

SUMMARY OF ENGAGEMENT:

Dates		Total No. of Months	Name and Address of Organization
From	To		

SUMMARY OF ENGAGEMENT:

3. PROFESSIONAL ENGINEER LICENSE INFORMATION

State	Branch of Engineering	License Number	Date Granted	Date of Expiration

4. PROFESSIONAL ORGANIZATIONS AND SOCIETIES

Affiliation	Participation	
	From	To

5. CONTINUING EDUCATION

Sponsoring Organization and Course Title (concrete-related only, please)	Course Dates	
	From	To

6. TRAINING PROFICIENCY

Detail each course you have taught, beginning with the most recent. Use additional sheets if necessary.

Dates		Total No. of Months	Name and Address of Organization
From	To		

SUMMARY OF ENGAGEMENT:

Dates		Total No. of Months	Name and Address of Organization
From	To		

SUMMARY OF ENGAGEMENT:

I certify that I have received and reviewed the governing certification program policies specific to each program selected in this application and understand that it is crucial to the integrity of the ACI Certification program that I enforce ACI Certification program policies at all times. I also certify that the information provided on this application is accurate to the best of my knowledge.

Applicant Signature

Date

Please send this application to:
ACI Certification Department, 38800 Country Club Drive, Farmington Hills, MI 48331
FAX: (248) 848-3793 or email: aci.certification@concrete.org