

INSTRUCTIONS

Candidate completes Sections A and B of this form and then forwards the form to the respondent, who completes Section C (which is a review of the candidate's statements made in Section B). For more information please go to www.acicertification.org.

SECTION A—To be completed by the candidate (please print legibly)

1. Candidate Name _____ Certification ID/Last 4 digits of SSN _____
 Address _____ City _____ State _____ Zip _____

I have passed the ACI Level III Nuclear Exam (retired program).

2. ATTACHMENTS*: Photocopy of Front and Back of ACI Wallet Card for:

- ACI Concrete Field Testing Technician—Grade I
- ACI Concrete Strength Testing Technician
- ACI Concrete Flatwork Technician

* Candidate must provide proof of current or past certifications in all of the above required programs, or of passing the written examination portions.

3. EDUCATIONAL BACKGROUND

Name of Institution	City & State	Degree Received or Credit Hours	Dates of Attendance
High School			
College/Technical School		<input type="checkbox"/> Mark here if ABET-accredited	
College/Technical School		<input type="checkbox"/> Mark here if ABET-accredited	
College/Technical School		<input type="checkbox"/> Mark here if ABET-accredited	

Attach a copy of your diploma, transcript, or other proof of education. **Do not send original versions of diplomas!**

- Copy of Diploma, Professional Engineer license, or other documentation enclosed
- Copy of Diploma, Professional Engineer license, or other documentation not enclosed; will be sent later. Please process this application pending receipt.

****If proof of education is not attached, candidate review will be suspended until received.****

SECTION B—To be completed by the candidate (please print legibly)

4. Employer (during time period in #5) _____

Respondent Name _____ Title (during time period in #5) _____

Employer Address _____ City _____ State _____ Zip _____

5. Term of working relations between candidate & respondent: From _____ To _____ = _____
Month & Year Month & Year Net # of Months

During this time period, the relationship of the respondent to the candidate was:

- Supervisor
- Employer
- Other—Please explain _____

6. Percentage of time in #5 that was spent in concrete materials-related work:

List percentage here _____ % [100% = full time materials-related employment based on a 40-hour work week. Provide a higher percentage if on average more than 40 hours per week were spent performing concrete materials-related work, or provide a lower percentage if on average less than 40 hours per week were spent performing concrete materials-related work (i.e. duties were split between concrete materials-related work and non-concrete materials related work).]

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7. During the time period in #5, my work included (Check all that apply):

- | Yes | No | |
|--------------------------|--------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Decision-making authority and responsibility |
| <input type="checkbox"/> | <input type="checkbox"/> | Verification of compliance with plans, specifications, and codes |
| <input type="checkbox"/> | <input type="checkbox"/> | Knowledge in administration of a concrete QA/QC plan |
| <input type="checkbox"/> | <input type="checkbox"/> | Documentation and reporting of test results |
| <input type="checkbox"/> | <input type="checkbox"/> | Proficiency in preparation of concrete mix proportions |
| <input type="checkbox"/> | <input type="checkbox"/> | Proficiency in evaluation of concrete and concrete materials test reports and documents |

Candidate Authorization to Release Information

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 here-in constitute grounds for denial of certification.

Candidate Signature

Date

Print Name

SECTION C—To be completed by the respondent

Respondent—Please review all of the information provided by the candidate in Section B. You are being asked to verify work experience in order for this candidate to meet qualifications for certification as an ACI Concrete Quality Technical Manager. Please note that the disclaimer signed by the candidate in Section B above releases you from civil liability in regard to statements, provided to the best of your knowledge about the candidate, and establishes that the candidate 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 inconsistencies and ambiguities by writing in corrections in Section B.

2. Comments

Respondent Verification

I have honestly evaluated the information being submitted on this form by the candidate. 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.

Respondent Signature

Date

Print Name

Title

Respondent's Present Employer

Respondent's Employer Telephone

Respondent's Email

IMPORTANT NOTE TO RESPONDENT:
The candidate should not see this form after you have completed Section C.
Please return the completed form to ACI Certification in a sealed envelope.