



Solar PV Installer Certification

APPLICATION FORM

Please refer to the Candidate Information Handbook for complete instructions & policies.

Please refer to www.nabcep.org for the latest exam date and application deadlines.

NABCEP encourages applicants to apply electronically at <http://forms.nabcep.org>

Please type or print all information.

1. PERSONAL INFORMATION				
Last Name		First	Middle	Suffix
Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/>	Ms. <input type="checkbox"/>	Birth Date (mm/dd/yyyy) ____/____/____	
		Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>		
Mailing Address: Street Address or P.O. Box				
Address line 2				
City		State	Zip Code	Country
Residence Address (If different than mailing address above): Street Address or P.O. Box				
Address line 2				
City		State	Zip Code	Country
Primary Phone Number			Fax Number	
Alternate Phone Number			May NABCEP contact you via email with reminders and information about your certification? NABCEP will not sell email addresses under any circumstances. Yes, send me email <input type="checkbox"/> No <input type="checkbox"/>	
E-Mail Address				
Prior Name Information: Have you used, been known as, or called by another name (example - maiden name, pseudonym, nickname or alias) other than the name signed to the application? If your answer is yes, state name or names used below.				
Last Name		First name	Middle	Dates Used
1.				
2.				
3.				
2. BUSINESS INFORMATION				
Do you Own your Renewable Energy Business? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If yes, please provide your Business info below.</i>				
Business Name(s) and/or DBA(s) used past or currently:			Business Incorporation or other Effective Date:	

3. PRIOR AND EXISTING LICENSES, CERTIFICATIONS AND REGISTRATIONS

If you currently or previously have held business or professional license(s), certification(s) or registration(s) in any jurisdiction, please list them below. Copy this section and attach the copy if you need additional space.

1. License, Certification or Registration Type		State or Jurisdiction	
Status : Active <input type="checkbox"/>	Inactive <input type="checkbox"/>	From (mm/dd/yyyy) / /	To (mm/dd/yyyy) / /
License, Certification or Registration Number		Name Used	
2. License, Certification or Registration Type		State or Jurisdiction	
Status : Active <input type="checkbox"/>	Inactive <input type="checkbox"/>	From (mm/dd/yyyy) / /	To (mm/dd/yyyy) / /
License, Certification or Registration Number		Name Used	
3. License, Certification or Registration Type		State or Jurisdiction	
Status : Active <input type="checkbox"/>	Inactive <input type="checkbox"/>	From (mm/dd/yyyy) / /	To (mm/dd/yyyy) / /
License, Certification or Registration Number		Name Used	

Additional licenses, certifications or registrations are identified on an attached page: Yes No

4. QUALIFYING CATEGORY **

In order to be eligible for NABCEP certification, you must qualify through one of the categories below. Please read **ALL** categories carefully first. Note: Choose the category which is appropriate for you. (It may reduce your paperwork.)

- A Experience installing PV systems occurring at some point in the two (2) years prior to submitting an application for the exam in addition to completion of a board-recognized training program (see definition in Sections 3.2.2 and 3.2.3 below)
- B Be an existing licensed contractor in good standing in solar or electrical construction-related areas with experience installing PV systems occurring at some point in the two (2) years prior to submitting an application for the exam in addition to completion of a board-recognized training program (see definition in Sections 3.2.2 and 3.2.3 below)
- C Four (4) years of electrical construction-related experience working for a licensed contractor, including experience installing PV systems occurring at some point in the two (2) years prior to submitting an application for the exam in addition to completion of a board-recognized training program (see definition in Sections 3.2.2 and 3.2.3 below)
- D Three (3) years experience in a U.S. Dept. of Labor-approved electrical construction trade apprentice program, including experience installing PV systems occurring at some point in the two (2) years prior to submitting an application for the exam in addition to completion of a board-recognized training program (see definition in Sections 3.2.2 and 3.2.3 below)
- E Two (2)-year electrical construction-related, or electrical engineering technology, or renewable energy technology/technician degree from an educational institution or four (4)-year construction-related or engineering degree from an educational institution, including experience installing PV systems occurring at some point in the two (2) years prior to submitting an application for the exam.

**Note: experience = the installation of two PV systems occurring at some point in the two years prior to submitting an application for the exam. The individual must be in a responsible role on the job installing PV systems, in the role of foreman, supervisor, site manager, or experienced worker performing PV installation work without direct supervision.

5. VERIFICATION OF EMPLOYMENT AND EXPERIENCE

Hands-on experience is required for certification. Please document employment in a manner to demonstrate sufficient experience for the qualifying category (Section 4 of this Application) you have selected. For the purposes of certification, experience = the installation of two PV systems occurring at some point in the two years prior to submitting an application for the exam, while in the role of foreman, supervisor, site manager, or experienced worker performing PV installation work without direct supervision.

List employment in chronological order, starting with most current employment and include a job description summarizing responsibilities and # of/type of systems installed. In addition, a supervisor will need to sign off on your current employment in an attached letter. *If you are or were self-employed, provide a detailed description of your work and sign off on it.*

The **Candidate Information Handbook** Section 3.3 contains additional information on filling out this employment history.

Employer Business Name:

Address _____ City _____ State _____ Zip Code _____

Dates Employed (mm/dd/yyyy):

From: / / To: / /

Estimated # of installs
in which you participated: _____

Your Supervisor:

Telephone Number:

Provide a description of your duties and supervisory responsibilities. If your position changed during this employment, list dates for each position, beginning with your current or most recent position. Describe your duties, including the type and number of systems installed and your role in the installations. Use additional sheets if necessary.

In addition, a supervisor will need to sign off on your current employment. Please attach a letter from your supervisor. *If you are or were self-employed, sign the section below yourself, attesting to your work.*

Self-employment Verification: I performed solar installation work in the job described above as a self-employed individual.

Signature _____ Date _____

5. VERIFICATION OF EMPLOYMENT AND EXPERIENCE – Continued

Copy this page as needed to document your employment history covering the time-period required for the Qualifying Category (see Section 4 of this Application Form) by which you are qualifying to sit for the NABCEP exam and certification.

Employer Business Name:

Address City State Zip Code

Dates Employed (mm/dd/yyyy):

From: / / To: / / Estimated # of installs in which you participated: _____

Your Supervisor: Telephone Number:

Provide a description of your duties and supervisory responsibilities. If your position changed during this employment, list dates for each position, beginning with your current or most recent position. Describe your duties, including the type and number of systems installed and your role in the installations. Use additional sheets if necessary.

Employer Business Name:

Address City State Zip Code

Dates Employed (mm/dd/yyyy):

From: / / To: / / Estimated # of installs in which you participated: _____

Your Supervisor: Telephone Number:

Provide a description of your duties and supervisory responsibilities. If your position changed during this employment, list dates for each position, beginning with your current or most recent position. Describe your duties, including the type and number of systems installed and your role in the installations. Use additional sheets if necessary.

7. EDUCATION AND/OR APPRENTICESHIP

If your Qualifying Category requires education, copies of official transcripts or diplomas attesting to your attendance and degrees earned will need to be attached to the application form. For the purposes of certification, NABCEP will accept training to meet entry requirement option (a, b, c, and d) when the training meets the following outcomes:

- a) a minimum of 40 hours cumulative (can include product training, etc.)
- b) formal supervised training format (with a teacher-learner structure)
- c) covers core competencies from the PV Installer Task Analysis, including the National Electrical Code® and OSHA safety standards relevant to PV installation (or Canadian equivalents for Canadian nationals).

Entry Options A, B, C, and D	<p><i>Complete at least 40 hours of training. List training courses completed along with Contact hours for each (teacher-learner class time). Attach transcripts and/or proof of attendance.</i></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p style="text-align: right;">Total Contact Hours Completed: _____</p>
------------------------------	--

Entry Option D	<p><i>Attend a DOL-approved apprenticeship program for at least 3 years. Indicate apprenticeship program sponsor and give a program description and dates. Attach proof of completion.</i></p>
----------------	--

Entry Option E	<p><i>Two-year electrical-construction related, or electrical engineering technology, or renewable energy technology/technician degree from an educational institution or a four-year construction related or engineering degree from an educational institution. Indicate institution and degree earned (dates) and attach proof of completion.</i></p>
----------------	--

8. SPECIAL ACCOMMODATIONS REQUESTS

Are you requesting special testing accommodations for a disability or religious observance? Yes No

If you answered yes, please complete the Request for Special Exam Accommodations Form (in the **Candidate Information Handbook**) and attach it to your application. Please refer to Section 5.3 of the **Candidate Information Handbook** for details.

9. PAYMENT INFORMATION

Please enclose a check or money order payable to NABCEP in the amount of **\$100 U.S.**, a nonrefundable Application Fee.

10. CODE OF ETHICS

The Code of Ethics of the Photovoltaic Practitioner requires certificants to uphold professional standards that allow for the proper and ethical discharge of their responsibilities and maintain the integrity of the credential. Through the establishment of the Code of Ethics, the NABCEP Board of Directors seeks to assure the highest standards of behavior and principles in the renewable energy and energy efficiency industries. For a copy of the complete Code of Ethics, See Appendix II of the **Candidate Information Handbook**. As a certificant, I agree to uphold and abide by the NABCEP Code of Ethics. I will:

- deal with all clients, consumers, and other professionals and professional organizations fairly and in a timely manner;
- provide safe and quality services to clients and consumers;
- respect and promote the rights of clients and consumers by offering only professional services that I am qualified to perform, and by adequately informing clients and consumers about nature of proposed services, including any relevant concerns or risks;
- maintain the confidentiality and privacy of all client and consumer information;
- avoid conduct which may cause a conflict with client or others;
- engage in moral and ethical business practices, including accurate and truthful representations concerning professional information and system performance expectations;
- be truthful with regard to research sources, findings, and related professional activities;
- maintain accurate and complete business and professional records;
- respect the intellectual property and contributions of others;
- further the professionalism of renewable energy industry services; and,
- behave in a courteous and professional manner when communicating with NABCEP representatives.

11. AGREEMENT, ATTESTATION OF ACCURACY, AND RELEASE

By signing this agreement below, I represent and agree to the following terms, conditions, and releases related to the North American Board of Certified Energy Practitioners, Inc., (NABCEP) and the Solar PV Installer Certification:

1. I understand and accept all NABCEP certification policies, procedures, and requirements. I agree to satisfy, and conduct myself in accordance with, all NABCEP policies and procedures, and any decisions or policies issued by the NABCEP Board of Directors or its authorized representatives, as currently constituted and as amended. I agree that if NABCEP determines that my compliance with a NABCEP policy, procedure, other requirement, or any of the terms of this agreement requires or includes an explanation, additional information, and/or supporting documents, I will provide a complete and accurate response and true copies of the materials to NABCEP in a timely manner. I agree that any refusal or failure to provide true, timely, and complete responses to questions in this application, renewal forms, or to other NABCEP requests for information may lead to further investigation, and/or sanctions by NABCEP Board of Directors, including the denial or revocation of a certification. I agree that the NABCEP has the right to communicate with any person, government agency, or organization to review or confirm the information in this certification application or any other information related to my application or Solar PV Installer Certification. I agree that NABCEP may investigate my professional standing. Further, I agree to, and authorize the release of, any information requested by NABCEP for such review and confirmation. I agree that all materials that I submit to NABCEP will become the property of NABCEP, and that NABCEP is not required to return any of these materials to me. I agree to notify NABCEP in a timely manner, of any changes concerning the information I have provided, including address and telephone number information. I agree that information related to my participation in the NABCEP certification process may be used in an anonymous manner for research purposes, and for other lawful purposes authorized by the Board of Directors. I agree that upon designation as a Certified Solar PV Installer by NABCEP, my professional contact information will be considered public information and may be made available to the public upon request. I agree that my Solar PV Installer Certification does not imply licensure or registration. I agree and accept that I shall not engage in any form of dishonest behavior with regard to the Solar PV Installer Certification examination. I understand that such dishonesty includes, but is not limited to, the following: using unauthorized materials to complete my Solar PV Installer examination; copying the work of another candidate or other individual, or representing another candidate's or other individual's work as my own work; having another individual take or otherwise assist me in completing the examination; providing unauthorized materials or information to others during the examination; and any other activity which may provide me or another candidate with an unfair advantage. I agree and accept that all communications, written, oral or otherwise, during the Solar PV Installer examination are forbidden, as is the use of any outside notes, books, calculators or other material in any form other than those provided by NABCEP for use during the examination itself. I understand and accept that the contents of all NABCEP test and examination related information and materials shall be held strictly confidential, and that the entire ownership interest in this information and materials is held by NABCEP and controlled by the NABCEP Board of Directors. I understand and accept that my possession of any

test and examination related information is for the sole purpose of taking the Solar PV Installer Certification examination, and that no other person, group of individuals, corporation, or other entity shall have any license or permission to use any test and examination related information. I agree not to discuss, share, distribute, reproduce in any manner, or otherwise disclose the specific content of the Solar PV Installer test questions, answers, and examination related information and materials to any individual or organization.

2. I understand and accept that, in appropriate circumstances as determined by the NABCEP Board and its representatives, NABCEP reserves the sole and exclusive rights to: suspend, cancel, revoke, or otherwise terminate any eligibility, certification decisions, and any rights or privileges related to the Solar PV Installer Certification process; and, suspend or terminate candidate examination privileges, exam scoring, or other test evaluation activities. Among other circumstances, the suspension or termination of examination or other privileges, and the issuance of remedial and/or disciplinary actions, will be authorized, where: a specialty certification application or testing irregularity or impropriety occurs; a candidate or Certified Solar PV Installer engages in misconduct or other conduct contrary to NABCEP policies and requirements; or, certification eligibility information or testing scoring or evaluation results are determined to be invalid for any other reason.
3. I agree that all disputes relating in any way to my Solar PV Installer application and examination will be resolved solely and exclusively by means of NABCEP policies, procedures, and rules, including the NABCEP Certification Appeals Procedures.
4. I certify that the information I have provided with respect to this application is accurate and complete. I understand that any misrepresentations or incorrect information provided to NABCEP can result in discipline or sanctions, including certification ineligibility, suspension, or revocation.
5. I release, discharge, and indemnify NABCEP, its directors, officers, examiners, employees, attorneys, representatives, and agents from all liability and claims that may arise out of, or be related to, my professional practice and related activities.
6. I release, discharge, and indemnify NABCEP, its directors, officers, examiners, employees, attorneys, representatives, and agents from any actions, suits, obligations, damages, claims, or demands arising out of, or in connection with, this application, NABCEP examination activities, or any other action taken by the NABCEP Board of Directors and NABCEP with regard to its certification activities, including, but not limited to, all actions related to ethics policies and matters. I understand and agree that any decision concerning my qualifications and eligibility for any specialty certification, and my continuing qualification for any specialty certification, rests within the sole and exclusive discretion of the NABCEP Board of Directors and that these decisions are final.

I fully understand and agree to each and all of the terms set forth above.

Signature: _____ Date: _____

Printed Name: _____

Send Application form and Payment to:

Professional Testing, Inc.

NABCEP

7680 Universal Blvd., Suite 300

Orlando, FL 32819

Phone: (800) 654-0021 • Fax: (407) 264-2855

12. INSTRUCTIONS

Your application form should be postmarked by the date marked on the first page of this application form.

Your application form needs to be complete at the time it is submitted, containing all attachments and photocopies required.

Do not send pieces under separate cover.

You will be notified that your application has been approved approximately 5 weeks prior to the exam. Please call NABCEP if you have not received notification of approval or denial of eligibility to sit for the Exam, and your Exam Scheduling Form, at 4 weeks prior to the exam date.

Solar PV Installer Application Checklist

- Did you accurately complete the Personal Information Section of the Application Form?
- Did you select the Qualification Category option that best describes your experience?
- Did you attach a letter signed by your current supervisor (unless you are self-employed)?
- Did you attach copies of permit(s) for PV installations listed?
- Did you attach copies of inspection certificate(s) for PV installations listed?
- Did you attach *optional* documentation for PV installations listed (such as letters from the customer, photos, design plans, a letter from your employer, etc.)?
- Did you submit copies of official transcripts or diplomas for any training, education and/or degrees required for the Qualifying Category you have selected?
- Did you attach the Special Testing Accommodations Form if you desire special accommodations?
- Did you put your NAME at the top of each page of the application?
- Did you put your NAME at the top of each attachment?
- Did you read the Code of the Ethics and sign Agreement that follows it?
- Did you make a COPY of the entire application form and supporting documentation?
- Have you enclosed a check or money order for \$100 payable to NABCEP?

STATEMENT OF NONDISCRIMINATORY POLICY

The North American Board of Certified Energy Practitioners is dedicated to the principles of equal opportunity and equal access to its programs and services. NABCEP does not discriminate against any individual on the basis of religion, gender, ethnic background, nationality, disability, sexual orientation, or other reason prohibited by law. NABCEP grants certification without regard to an applicant's membership or non-membership on any organization, association or other group.

STATEMENT OF CONFIDENTIALITY POLICY

Unless authorized by NABCEP policy or practice, NABCEP will take all reasonable precautions to ensure that candidate application information will not be released to 3rd parties.

Professional Testing, Inc.
NABCEP
7680 Universal Blvd., Suite 300
Orlando, FL 32819
Email: nabcep@proftesting.com

Phone: (800) 654-0021
Fax (407) 264-2855



APPLICATION for RECERTIFICATION Solar PV Installer

Please type or print all information clearly.

1. PERSONAL INFORMATION				
Last Name	First	Middle	Suffix	Birth Date (mm/dd/yyyy) ____/____/____
Current Mailing Address: Street Address or P.O. Box				
City	State	Zip Code	Country	
Primary Phone Number			Fax Number	
Alternate Phone Number			May NABCEP contact you via email with reminders and information about your certification? NABCEP will not sell email addresses nor list email addresses with certificant information under any circumstances. Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please list your email in the box at left.	
E-Mail Address				
Has your address or name changed since your NABCEP certification? If so, please list your old address and/or name below.				
Prior Address: Street Address or P.O. Box, City, State, Zip				
Name Change: Old Name		Reason for Name Change: <i>(optional)</i>		
NABCEP Certification Number: (If known)				
1. BUSINESS INFORMATION				
Do you Own your Renewable Energy Business? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If yes, please provide your Business info below.</i>				
Business Name(s) and/or DBA(s) used currently:			Business Incorporation or other Effective Date:	
2. EXISTING LICENSES, CERTIFICATIONS AND REGISTRATIONS				
If licenses, registrations or certifications (other than NABCEP) are required for solar PV installation by the jurisdictions in which you do your work, maintaining NABCEP Certification requires that you hold these credentials. Please list below any required licenses, registrations or other certifications that you hold in order to practice solar installation. Attach extra pages if necessary.				
1. License, Certification or Registration Type	State or Jurisdiction		Held since (date)	
License, Certification or Registration Number		Name Used		
2. License, Certification or Registration Type	State or Jurisdiction		Held since (date)	
License, Certification or Registration Number		Name Used		

Total System size: (in watts or kW)	c) System Components: # and size of panels, inverter, batteries, etc.
Does the system have an inverter? Yes <input type="checkbox"/> No <input type="checkbox"/>	d) Permitting and Inspection Authority: Jurisdiction Permit/job number Date County Lot# (if required for Permit)
If no permitting or inspecting authority was available, check here and explain at right: <input type="checkbox"/>	Explanation of lack of permitting or inspection opportunity (if applicable):
e) Responsible contractor, installer or business (if different from applicant) Name Phone Number	
Description of work performed by applicant, number of workers supervised, and level of responsibility:	
3rd PV System INSTALLATION	
Dates Job Performed (mm/yyyy) From: To:	a) Job Location Physical Address: Address City State Zip b) System owner/operator Contact Info: Name Phone Number
Total System size: (in watts or kW.	c) System Components: # and size of panels, inverter, batteries, etc.
Does the system have an inverter? Yes <input type="checkbox"/> No <input type="checkbox"/>	d) Permitting and Inspection Authority: Jurisdiction Permit/job number Date County Lot# (if required for Permit)
If no permitting or inspecting authority was available, check here and explain at right: <input type="checkbox"/>	Explanation of lack of permitting or inspection opportunity (if applicable):
e) Responsible contractor, installer or business (if different from applicant) Name Phone Number	
Description of work performed by applicant, number of workers supervised, and level of responsibility:	

5. Fees

- It is suggested that certificants file a Recertification Application and pay the \$300 fee at least ninety (90) days prior to the expiration of their certificate.
- Certificants who apply for Recertification after their certificate has expired will be required to pay a late fee of \$50 in addition to the \$300 Recertification Fee.

If paying by credit card, please complete and include a Payment Remittance Form.

I am enclosing a check or money order, payable to NABCEP, in the amount of \$ _____.

6. ATTEST STATEMENT

By signing below, I attest that the information contained in this Application for Recertification is true and correct to the best of my knowledge. Furthermore, I acknowledge the right of NABCEP to verify this information by contacting the proper authorities. I also attest that I continue to follow the NABCEP Code of Ethics in my installation practices.

Signed _____ **Date:** _____

Please return the application for recertification to NABCEP.

NABCEP
56 Clifton Country Road, Suite 202
Clifton Park, NY, 12065
Email: info@nabcep.org

Phone: (800) 654-0021
Fax (518) 899-1092

