North American Board of NABCEP Certified Energy Practitioners®

Solar Thermal Installer Certification
APPLICATION FORM

The Application Fee for Paper Applications is now $150

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.☐ Mrs.☐ Ms.☐	Birth Date (mm/dd/yyyy)____/___/_____	Gender: Male ☐ Female ☐

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 ☐ No ☐
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 ☐ No ☐ *If yes, please provide your Business info below.*

Business Name(s) and/or DBA(s) used past or currently:	Business Incorporation or other Effective Date:

© NABCEP 2010

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 ☐ Inactive ☐	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 ☐ Inactive ☐	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 ☐ Inactive ☐	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.)

1 ☐	**1-a)** Four (4) years of experience installing Solar Hot Water Systems (document 8 installs); **OR** **1-b)** Two (2) years of experience installing Solar Pool Heating Systems in addition to completion of a Board-recognized training program (document 4 installs + include certificates or info for 40 hours of Board-recognized training. For definition of Board-recognized training see sections 3.2.3 through 3.2.5 of the Candidate Handbook)); **OR**
2 ☐	Two (2) years of experience installing Solar Thermal Systems in addition to completion of a Board-recognized training program (document 4 installs + include certificates or info for 40 hours of Board-recognized training. For definition of Board-recognized training see sections 3.2.3 through 3.2.5 of the Candidate Handbook)); **OR**
3 ☐	Be an existing licensed contractor in good standing in solar or construction-related areas with one (1) year of experience installing Solar Thermal Systems, (document 2 installs and include information for active contractor' license: photocopy, license number, etc.) **OR**
4 ☐	Four (4) years of HVAC, mechanical, pipe-fitting or plumbing-related experience working for a licensed contractor, including one (1) year of experience installing Solar Thermal systems (document 2 installs and include or have sent an employer reference for 4 years experience); **OR**
5 ☐	Three (3) years experience in a government/trade union-approved construction trade apprentice program, including one (1) year of experience installing Solar Thermal Systems (document 2 installs and include proof of diploma), **OR**
6 ☐	Two (2) year construction-related, or engineering technology, or renewable energy technology /technician degree from an accredited educational institution plus one (1) year of experience installing Solar Thermal Systems (document 2 installs and include copy of diploma or transcript); **OR**
7 ☐	Four (4)-year engineering degree from an accredited educational institution, including (1) year experience installing Solar Thermal Systems (document 2 installs and include copy of diploma transcript), **OR**

8 ☐	NABCEP© Solar PV Installer Certification AND 16 hours of Board-recognized AND include installation of at least two solar hot water systems. These two systems require permitting and inspection process by a permitting authority – OR – in the absence of such, an appropriate underwriter authorized to provide an inspection certificate. In regions where neither of these inspection options exist, the Application Review Committee will judge experience based on supplied documentation.

Note: For these purposes, experience installing Solar Thermal Systems requires one year in a responsible role on the job installing Solar Thermal Systems, in the role of foreman, supervisor, site manager, or experienced worker performing Solar Thermal installation work without direct supervision. **Each year of experience requires an average of 2 installations. For example, if you are applying under category "1-a", you must list 8 installations.

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, one (1) year of experience = one year in a responsible role on the job installing Solar Thermal systems, in the role of foreman, supervisor, site manager, or experienced worker performing Solar Thermal installation work without direct supervision. Each year of work in the Solar Thermal field must include the installation of at least two solar hot water or pool heating systems, depending on your category. See Section 6 of this application to document compliance with this requirement.

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):	Estimated # of installs
From: / / To: / /	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.

6. SOLAR THERMAL INSTALLATION REQUIREMENT

Certification requires that you install at least two Solar Thermal installation projects for each year of experience required under the qualifying category you choose in Section 4 of this Application. Each installation must be a system subject to a complete permitting and inspection process by a permitting authority – OR, in the absence of such, an appropriate underwriter authorized to provide an inspection certificate. In regions where neither of these inspection options exist, the Application Review Committee will judge experience based on supplied documentation.

NABCEP reserves the right to contact system owners/operators, permitting authorities, and responsible contractors to verify work listed in this section. Attach copies of any permits or inspection certificates acquired. Optional: attach a photo of the system, attach letters from customers, design plans, a letter from your employer asserting that you performed the work listed, or other documentation. If a license for solar installation is required in the jurisdiction in which the work is performed, candidates must submit their license number -- or the license number under which the work was performed.

The ***Candidate Information Handbook*** Section 3.4 has additional information on documenting the Solar Thermal installation requirement.

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 kW. (Use 1 kW per 10 SF of collector space, for approx. purposes only.) **Enter kW:**	***c) System Components****: # and size of collectors, solar tanks, etc..*
Is the system for hot water or pool heating?	***d) Permitting and Inspection Authority:*** *(attach COPIES of any permits or inspection certificates)* *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: ☐	*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:	

List of documentation attached: See Candidate Information Handbook Section 3.4 for details on acceptable documentation.*

☐ Copies of permit(s) (list # attached _____) ☐ OTHER Documentation (please describe below):

☐ Copies of inspection certificate(s) (list # attached _____)

☐ Optional photo of the system (list # attached _____)

☐ Optional letter(s) from customers (list # attached _____)

☐ Optional design plans (list # of pages attached _____)

☐ Optional employer verification letter(s) (list # attached _____)

6. SOLAR THERMAL INSTALLATION REQUIREMENT -- Continued

See instructions on previous page, and in Section 3.4 of the ***Candidate Information Handbook***. Copy this page as needed.

Dates Job Performed (mm/yyyy) From: To:	***a) Job Location Physical Address****:* Address City State Zip ***b) System owner/operator:*** Name Phone Number
Total System size: In kW. (Use 1 kW per 10 SF of collector space, for approx. purposes only.) **Enter kW:**	***c) System Components****: # and size collectors, solar tanks, etc..*
Is the system for hot water or pool heating?	***d) Permitting and Inspection Authority:*** *(attach COPIES of any permits or inspection certificates)* *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: ☐	*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:

List of documentation attached: See Candidate Information Handbook section 3.4 for details on acceptable documentation.*

☐ Copies of permit(s) (list # attached _____) ☐ OTHER Documentation (please describe below):

☐ Copies of inspection certificate(s) (list # attached _____)

☐ Optional photo of the system (list # attached _____)

☐ Optional letter(s) from customers (list # attached _____)

☐ Optional design plans (list # of pages attached _____)

☐ Optional employer verification letter(s) (list # attached _____)

© NABCEP 2010

7. EDUCATION AND/OR APPRENTICESHIP (for entry options 1-b, 2, 5, 6, 7, 8)

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 (b) when the training meets the following outcomes:

c) a minimum of 16 or 40 hours cumulative, depending on category (can include product training, etc.)

d) formal supervised training format (with a teacher-learner structure)

e) covers core competencies from the Solar Thermal Installer Task Analysis and OSHA safety standards relevant to solar thermal installation (or Canadian equivalents for Canadian nationals).

Entry Option 1-b Entry Option 8	*Complete at least 16 hours of training. List training courses completed along with contact hours for each (teacher-learner class time). Attach transcripts and/or proof of attendance.* **Total Contact Hours Completed:**_____
Entry Option 2	*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.* **Total Contact Hours Completed:**_____
Entry Option 5	*Attend a government or trade union-approved construction trade apprentice program for at least 3 years. Indicate apprenticeship program sponsor and give a program description and dates. Attach proof of completion.*
Entry Option 6	*Two-year construction-related, or engineering technology, or renewable energy technology/technician degree from an accredited educational institution. Indicate institution and degree earned (dates) and attach proof of completion.*
Entry Option 7	*Four-year engineering degree from an accredited educational institution. Indicate institution and degree earned (dates) and attach proof of completion.*

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.

© NABCEP 2010

9. CODE OF ETHICS

The Code of Ethics of the Solar Thermal 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.

10. 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 Thermal 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 Thermal 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 Thermal 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 Thermal 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 Thermal Installer Certification examination. I understand that such dishonesty includes, but is not limited to, the following: using unauthorized materials to complete my Solar Thermal 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 Thermal 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 Thermal 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 Thermal 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 Thermal 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 Thermal 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 Thermal 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: _____

11. PAYMENT INFORMATION

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 $ _____.

12. INSTRUCTIONS

Your application form must be postmarked by the date advertised on www.nabcep.org , else it will be rolled over to the next exam.

This application needs to be as complete as possible at the time it is submitted, containing all attachments and photocopies required. However, we understand some items may have to be sent 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 Thermal 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 Solar Thermal installations listed?
- ☐ Did you attach copies of inspection certificate(s) for Solar Thermal installations listed?
- ☐ Did you attach *optional* documentation for Solar Thermal 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 your application fee of $100?

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
PO Box 691226
Orlando, FL 32819-1226
Email: nabcep@proftesting.com

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

© North American Board of Certified Energy Practitioners, July 2010

North American Board of NABCEP Certified Energy Practitioners®

APPLICATION FOR RECERTIFICATION

Solar Thermal Installer Certification

The Recertification Fee for Paper Applications is now $350

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

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

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 ☐ No ☐ 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: *(optional)*

NABCEP Certification Number: (If known)

2. BUSINESS INFORMATION

Do you Own your Renewable Energy Business? Yes ☐ No ☐ *If yes, please provide your Business info below.*

Business Name(s) and/or DBA(s) used currently:	Business Incorporation or other Effective Date:

3. EXISTING LICENSES, CERTIFICATIONS AND REGISTRATIONS

If licenses, registrations or certifications (other than NABCEP) are required for Solar Thermal 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)

© NABCEP 2010

License, Certification or Registration Number	Name Used	
3. License, Certification or Registration Type	State or Jurisdiction	Held since (date)
License, Certification or Registration Number	Name Used	

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

4. CONTINUING EDUCATION Requirement

To maintain certification, the certified installer must document the completion of:1) At least 6 hours related to any of the primary Solar Thermal references listed on the NABCEP website (www.nabcep.org) under "Resources";2) At least 6 hours of technical Solar Thermal related to the most recent version of the NABCEP Solar Thermal Installer Task Analysis or complementary to solar thermal technology; 3) "Other" - Up to an additional 6 hours of instruction related to solar thermal or renewable energy that may be technical or non-technical. *In addition to attendance at qualified educational and training events, NABCEP grants up to 12 continuing education contact hours to certificants who: instruct and teach qualifying courses; author qualifying articles or publications; and/or, present qualifying lectures, seminars or workshops.* See pages 14-15 in the NABCEP Candidate Information Handbook for detailed information on all of the above subjects.
A wide variety of courses can meet NABCEP approval but must: A) Have a formal training format, with a teacher-learner structure. This implies a connection between a learner and a learning source. B) Appropriately address issues of safety, the National Electrical Code, related to the most recent OSHA safety standards and core competencies of the NABCEP Solar Thermal Installer Task Analysis.
A contact hour (a.k.a.; *Continuing Education Unit* or ***CEU***) equals one 60-minute clock hour of organized learning activity including interaction between learner and instructor or learner and materials which have been prepared to cause learning. The number of contact hours for the course must be specified by the provider before the course is offered. Credit is not awarded for time spent on sales presentations, breaks, travel, receptions, or meals.

Primary Solar Thermal references listed on the NABCEP website (www.nabcep.org) under "Resources"; (at least 6 hours)	**Please list the name, date, and instructor of the course, as well as total #CEUs:** **Total # CEU hours Primary Solar Thermal References** _____
NABCEP Task Analysis/ PV Technology. (at least 6 hours)	**Please list the name, date, and instructor of the course, as well as total #CEUs:** **Total # CEU hours Task Analysis or ST Complementary Technology**_____
"Other" Subjects (6 hours)	**Please list the name, date, and instructor of the course, as well as total #CEUs:** **Total # CEU "Other" Subject Hours Completed:**_____

***NOTE: Including copies of training certificates awarded for the above Continuing Education classes is no longer required when you submit this Recertification application. However if you are later chosen for a random audit, you will, at that time, be required to submit them.**

5. Solar Thermal INSTALLATION Requirement – 1st System

Recertification requires that you install three qualifying installations over the course of a recertification cycle. (Not necessarily one per year.)

A qualifying system is one with an inverter and subject to a complete electrical permitting and inspection process by a permitting authority or, in the absence of such, an appropriate underwriter authorized to provide an inspection certificate. In regions where neither of these options exist, acceptance of the system will be based on supplied documentation.

NABCEP reserves the right to contact system owners/operators, permitting authorities, and responsible contractors to verify work listed in this section. If a license for solar installation is required in the jurisdiction in which the work is performed, candidates must submit their license number -- or the license number under which the work was performed. ***For Recertification, it is now optional to attach copies of any permits or inspection certificates acquired; however, if you are later chosen for a random audit you will be required to supply these certificates.*** It is also **optional** to attach letters from customers, photos, design plans, employer affidavits asserting that you performed the work listed, or other documentation.

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 kW. (Use 1 kW per 10 SF of collector space, for approx. purposes only.) **Enter kW:**	***c) System Components****: # and size of collectors, solar tanks, etc..*
Is the system for hot water or pool heating?	***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: ☐	*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. (Cont.) Solar Thermal INSTALLATION Requirement – 2nd System

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 kW. (Use 1 kW per 10 SF of collector space, for approx. purposes only.) **Enter kW:**	***c) System Components****: # and size of collectors, solar tanks, etc.*
Is the system for hot water or pool heating?	***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: ☐	*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. (Cont.) Solar Thermal INSTALLATION Requirement – 3rd System

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 kW. (Use 1 kW per 10 SF of collector space, for approx. purposes only.) **Enter kW:**	***c) System Components****: # and size of collectors, solar tanks, etc.*
Is the system for hot water or pool heating?	***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: ☐	*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:

6. 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 $ _____.

7. 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

© NABCEP 2010

North American Board of NABCEP Certified Energy Practitioners ®

PAYMENT REMITTANCE FORM

Please fill in the following boxes **EXACTLY** as shown on your **credit card billing statement**. Illegible, incomplete or missing information will delay or prevent processing.

1. IDENTIFICATION INFORMATION

Last Name **or Company Name on Card**	First	Middle	Suffix

Credit Card Billing Address: Street Address or P.O. Box

Address line 2

City	State	Zip Code	Country

Phone Number	E-Mail Address

2. Certification Type

This regards certification in: ☐ Solar Photovoltaic ☐ Solar Thermal ☐ Small Wind

3. FEES (check one)

☐ $100 Application fee	☐ $25 Duplicate Document fee
☐ $300 First time exam fee	☐ $200 Exam Retake fee
☐ $300 Recertification Application fee	☐ $50 Recertification Late Fee
☐ $200 Continuing Education Application fee	☐ $300 PV Entry Level Provider fee
☐ $75 Entry Level Exam fee	☐ $**50 Paper Application Fee**

☐ Check or money order payable to NABCEP.

☐ VISA

☐ Mastercard

Name on card: _____ Signature of cardholder: _____

M M / Y Y
Expiration Date

Credit Card number (do not use spaces or dashes)

4. Signature and Date

I affirm that the information I have provided in this form is correct and I authorize NABCEP to proceed with the above credit card charge.

Signature:

Date:

Send this form and Payment to:

Professional Testing, Inc.
NABCEP
PO Box 691226
Orlando, FL 32819-1226

Fax: (407) 264-2855

Email: nabcep@proftesting.com

© NABCEP 2010