

Experienced Personnel Form for Professional Certification Exams

SECTION I: QUALIFICATIONS FULFILLMENT

For this particular certification exam I am qualified because: Check the most relevant for the certification you wish to PURSUE.

- I have held a position for at least ___ years and my experience includes the following:

For CI:

- POE & POU installations
- Training others to do installation
- Overseeing installations
- Licensed plumber

For CWS:

- System configurations or quotes

For CST:

- System troubleshooting

For CWR:

- Sales

Position held: _____

With (*company*): _____

At (*location*): _____

- I have a bachelor's degree in science:
(Required for Accelerated Plus if only have 2 years of experience.)
- a. Degree: _____ in: _____ at: _____
- I currently hold a professional certification title:
- CWS
 - MWS
 - CWR
 - CST
 - MST
 - CI





SECTION II: REFERENCES

Please provide a reference from your employer or someone who can verify your experience qualifications. References must be from persons who are at a higher level in your company or organization or from relevant persons outside your organization who are quite familiar with your work and qualifications.

Name: _____ E-mail: _____
Organization: _____ Relationship: _____
Address: _____ Phone: _____
_____ Fax: _____

SECTION III: COMPLIANCE WITH WQA EXPERIENCED PERSONNEL POLICY

I hereby affirm that the information given on this form is accurate, correct, and I am compliant with all the requirements specified in the WQA Exp. Personnel Policy.

Print Name

Signature