

Certification Application Form

Applicant Information		
First name	Last name	
Address		
City	State	Zipcode
Phone 1 <input type="checkbox"/> CELL <input type="checkbox"/> HOME <input type="checkbox"/> WORK		Phone 2 <input type="checkbox"/> CELL <input type="checkbox"/> HOME <input type="checkbox"/> WORK
E-mail		DOB (MM/DD/YYYY)
Exam Location		Exam Date (MM/DD/YYYY)
Have you taken the NGICP Certification Exam before? <input type="checkbox"/> YES <input type="checkbox"/> NO	Date of Exam (MM/DD/YYYY)	Location

NGICP Exam Eligibility Criteria

1. High school diploma or GED (or equivalent)
2. A minimum of 35 contact hours of training in GI construction, inspection, and maintenance of various GI practices (bioretention, blue/green roofs, permeable pavements, rainwater harvesting, dry wells, and stormwater wetlands).

Applicants must demonstrate that they have met these requirements by providing the Education and Training information requested below.

Education	<i>Note: A minimum of a tenth grade reading level is recommended to support candidates in completing the written multiple-choice NGICP exam.</i>	
<input type="checkbox"/> High school degree	School name	
	Location	Graduation date
<input type="checkbox"/> High school equivalency (GED)	State	Date received
Full legal name at the time you received high school diploma or equivalent:		
Highest level of education	<input type="checkbox"/> Some college <input type="checkbox"/> Two-year college degree <input type="checkbox"/> Four-year college degree <input type="checkbox"/> Advanced degree	

Training	Name of training program		Dates attended	Total contact hours
Instructor's information	Name		Phone	
	E-mail			

Note: Trainers will be submitting Training Attendance Verification documentation directly to NGICP.

Payment Section	Pay online at: https://weftst3.personifycloud.com/PersonifyEbusiness/Default.aspx?TabID=251&productId=68202191 .			
NGICP Certification Exam	Application Fee: NA			
<input type="checkbox"/> Check	<input type="checkbox"/> Personal Check <input type="checkbox"/> Company Check	Check No.		
<input type="checkbox"/> Credit Card	<input type="checkbox"/> American Express <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA			
	Card Number	Exp. Date.	CVV	
	Name on card			
	Billing Address			
	City	State	Zip code	
Signature	I authorize WEF to charge my credit card for the amount indicated.			Total Enclosed: \$ 0

DO NOT ENTER CREDIT CARD INFO HERE. EXAM FEES MUST BE PAID ONLINE

Do you have an ADA Title I disability/impairment for which you may need assistance during the exam? Yes | No
 Please enclose a letter (from a medical professional authorized to make such assessments) that describes the specific accommodations that will be required.

Audit Disclosure & Attestation: I certify that all information contained in this application, including any attachments, is true and correct to the best of my knowledge and belief. I understand that omissions may disqualify me and that knowingly making a false statement may result in the NGICP's refusal to issue a certificate or a revocation of any certification granted, as well as possible prosecution under appropriate law, which could provide for criminal penalties of a fine, imprisonment or both. I consent to an investigation of my education and training participation and other statements for the purpose of verification of my eligibility for certification. Additionally, I understand that NGICP audits a percentage of all applications to verify completion of a minimum of a High School diploma or equivalent as well as the required 35 hours of GI training. If I am unable to provide supporting documentation when audited or if I do not meet the minimum requirement, I will not be eligible to sit the NGICP exam. I also understand that if I am successful and I am awarded the NGICP certification, my name, city, state and certification status will be listed on the NGICP website and third party individuals and organizations such as potential employers will be given specific verification of my certification status if it is requested.

Applicant's Signature	Date
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Certification Code of Conduct

I, _____, agree to adhere to the following Code of Conduct.

I understand that failure to do so may result in the loss of certification.

- Act honestly, competently and with integrity;
- Use my knowledge and skill for the protection of the water environment;
- Be truthful and accurate in the information I provide to the NGICP.
- Adhere to all laws and regulations applicable to the profession;
- Promote and encourage a high quality level of work on all green infrastructure projects;
- Accurately represent my qualifications and credentials;
- Protect and keep information, including exam content, confidential in order to maintain it as an accurate validation of others' knowledge in green infrastructure;
- Strive for continued professional development throughout my career in a way that supports on-going improvement and efficiency of my day-to-day job tasks;
- Properly use the certificate, stamp and other marks of the NGICP designation, which are the property of WEF, as I am specifically authorized to do so;
- Uphold and follow all of the policies and procedures outlined in the NGICP Policies and Procedures Manual required in order to become and to remain NGICP certified and in good standing.
- Represent the NGICP professionally.

I further understand and agree that my signature constitutes a binding acceptance of these pledges and conditions.

I further understand that review within the NGICP Strategic Advisory Council will be the final determination of any matter arising between NGICP and me.

Name (please print)	
Signature	Date

FOR OFFICIAL USE ONLY	
Application ID	
Application approved for:	Date
<input type="checkbox"/> Application NOT approved	Prerequisite(s) not met: