

Examination Review Packet

This packet is for those that have not submitted an application for CISEC, Inc. to review their qualifications to sit for the nationwide certification examination and contains the following:

- Payment Form
- Application Form
- Proctor Form

The Payment Form

Information on this form is necessary to ensure your application material is properly entered into our system. Some important items about this form include the following:

- Data about yourself entered into the top part is automatically conveyed to the other forms.
- If you have taken the CISEC training modules via the On-Line or In-Person program, then the non-refundable application fee for an administrative review of your qualifications is \$150. However, you must provide proof of your payment for either of the two training module programs.
- If you have NOT taken either one of the CISEC training modules, then the non-refundable application fee for an administrative review of your qualifications is \$350.

The Application Form

The CISEC program seeks individuals that demonstrate they have the necessary background to be a professional and competent inspector. In order to assess your qualifications to meet these criteria, some of the more critical parts of this form include the following:

- Provide educational information on environmental classes you have completed that are pertinent to being an inspector of sediment and erosion control or storm water management.
- Provide sufficient information on your sediment and erosion control or storm water management work experience in to demonstrate at least 2-years of construction site familiarity.
- Submit the reference form (see Page 5) to your three references as soon as possible so they can submit their comments to CISEC, Inc. in a timely manner.

The Proctor Form

Only **after you are approved** to sit for the CISEC Certification Examination should the proctor form be submitted to CISEC, Inc. Some important information about completing this form includes the following:

- You can sit for the examination at no additional fee wherever a CISEC Program is presented.
- If you are going to seek a proctor, be sure to follow the requirements found at www.cisecinc.org.

Checklist for CISEC, Inc. to Review an Applicant's Qualifications to sit for the Certification Examination

- Are you submitting this application form AFTER enrolling into IECA's On-Line training modules? If so, have you identified the enrollment date and included a copy of your paid receipt with the submittal material?
- Are you submitting this application form AFTER registering and attending a CISEC, Inc.'s In-Person training modules? If so, have you identified the location and date when you attended the CISEC In-Person training modules and included a copy of your paid receipt with the submittal material?
- Are **all lines** filled out on the top part of the application form?
- Have you entered the non-refundable processing fee** on the application form?
- Do you have **three** references forms in **sealed and signed** envelopes to include with your application material? You can also have your references send their completed forms directly to CISEC, Inc. by fax at 303-841-6383 or by E-Mail at examination@cisecinc.org.
- Will you be sending the examination application forms, including payment, so that CISEC, Inc. **receives all material at least 21 days prior** to the examination date?
- Send the completed payment form, examination application material, and all fees by E-Mail, fax, or US Mail.

**** Payment includes**

- Time and expenses for CISEC, Inc. to review the application and reference materials,
- Time to conduct correspondence between CISEC, Inc. and the applicant,
- If deemed qualified by CISEC, Inc., permission to sit for the 3.5- to 4.0-hour examination,
- Grading the examination by CISEC, Inc.,
- Upon passing the examination by 75% or better, issuance of the nationwide CISEC certificate,
- CISEC, Inc. being available to answer questions prior to and after the examination, and
- One-year certification registration fee for CISEC registrants.

**IF YOU HAVE NOT HEARD ABOUT YOUR REVIEW STATUS
WITHIN SEVEN (7) DAYS BEFORE THE EXAMINATION,
PLEASE CALL 720-235-2783 OR SEND AN E-MAIL TO
EXAMINATION@CISECINC.ORG**



THESE FORMS CAN BE FILLED OUT USING YOUR COMPUTER

CISEC, Inc. P.O. Box 188 Parker, CO 80134 Ph: (720) 235-2783 Fax: 303-841-6383 Email: examination@cisecinc.org

APPLICATION FOR CISEC, INC. TO EVALUATE QUALIFICATIONS

Use a separate form for each applicant

Form with fields: First Name, Middle Initial, Last Name, Company or Agency, Mailing Address, City, State/Province, Zip/Postal Code, Office Phone, Fax, Home or Cell Phone, Email Address

FOR APPLICANTS SEEKING AN EVALUATION OF THEIR QUALIFICATIONS AFTER ENROLLING INTO MODULES 1, 2, 3, & 4 OF THE "ON-LINE" TRAINING PROGRAM OR FOR APPLICANTS THAT ATTENDED 1 1/2 DAYS OF CISEC, INC.'S "IN-PERSON" TRAINING PROGRAM ON MODULES 1, 2, 3, & 4 OR SEEK AN EVALUATION OF THEIR QUALIFICATIONS

Applicants cannot sit for the examination until approved by CISEC, Inc. Before the review process will begin, full payment, completed application, three completed reference forms (preferably in sealed envelopes), and any other required material must be submitted at least 21 days before any administration of the examination.

Non-Refundable Certification Administrative Fee for those that register for training modules US\$150***

- Enter the enrolment date into the On-Line training for Modules 1, 2, 3, & 4. Date: Proof of your registration must accompany this form.

OR (do not fill out both)

- Enter where and when you attended 1 1/2 days of CISEC, Inc.'s In-Person training for Modules 1, 2, 3, & 4. Proof of your CISEC, Inc. registration must accompany this form. City, State/Province: Date Attended:

Non-Refundable Certification Administrative Fee for those not registering into either CISEC, Inc.'s In-Person training or On-Line training program for Modules 1, 2, 3, & 4. US\$350***

Enter Fee to be Paid: US\$

Date of Purchase: Signature:

Administrative fees must be paid in full before any evaluation of an applicant's qualification material will occur

Payment Information: Check No. P.O. No.

Fill out the following if you are paying by credit card

VISA or MasterCard American Express

Expiration Date Security Code Exact Billing Name for Credit Card Billing Zip/Postal Code

Authorized Signature Date

*** An additional administrative fee of \$50 may be necessary when using a proctor (see last page)

Please send payment forms and accompanying material to CISEC, Inc. P.O. Box 188 Parker, CO 80134 OR Fax: 303-841-6386 Email: examination@cisecinc.org Call 720-235-2783



Application to Assess Eligibility for the CISEC Examination

Read the instructions and eligibility requirements before you complete this application. This is a fillable PDF form, or you can type or print clearly using dark ink.

GENERAL INFORMATION

1	First Name		Middle Initial	Last Name	
2	Company or Agency			Mailing Address	
3	City		State/Province	Zip/Postal Code	Office Phone
4	Fax	Home or Cell Phone		Email Address	

Education, Training, and Accreditations

EDUCATION

5	Did you graduate from high school or have a <i>GED high school equivalency</i> , YES <input type="checkbox"/> NO <input type="checkbox"/> If YES, give month and year graduated or received GED equivalency Have you ever attended school beyond 12 th grade? YES <input type="checkbox"/> NO <input type="checkbox"/>	6	Write the name and location (<i>city and state</i>) of the last high school you attended or where you obtained your GED high school equivalency.
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BACKGROUND INFORMATION

7	You must answer each question in this section before we can process your application	YES	NO
	a) During the last 10 years, were you fired from any job for any reason, did you quit after being told that you would be fired, or did you leave by mutual agreement because of specific problems?	<input type="checkbox"/>	<input type="checkbox"/>
	b) Have you ever been convicted of any felony violation?	<input type="checkbox"/>	<input type="checkbox"/>
	c) Are you now under charges for any violation of law? <i>Do not include traffic violations.</i>	<input type="checkbox"/>	<input type="checkbox"/>
	d) Have you ever been denied a technical certification or license?	<input type="checkbox"/>	<input type="checkbox"/>
	e) Have you ever had a technical certification or license revoked or suspended?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered **YES** in any part of Section 9, explain using a separate sheet of paper. Include the item letter and date.

- 8 CISEC, Inc. requires applicants keep current with sediment and erosion control and storm water pollution prevention courses and/or training. Please list one or more classes or training sessions in these topics that are related to construction site inspection, design, review, installation, and/or maintenance that have been completed within the last four years. If you require more space, use a separate sheet of paper and include the item number.

TRAINING ORGANIZATION/SPONSOR AND LOCATION	NAME OF COURSE/TRAINING SESSION	TRAINING HOURS	MONTH AND YEAR

RELATED CERTIFICATIONS

- 9 List any certifications related to sediment and erosion control inspection that you currently hold. If you need more space, use a separate sheet of paper and include the item letter.

CERTIFICATION	DATE OF LATEST CERTIFICATION	CERTIFICATION AGENCY	EXPIRATION DATE

Application to Assess Eligibility for the CISEC Examination

Inspection and Construction Experience Profile

Applicant Name _____

INSTRUCTIONS

10 Applicants must demonstrate at least two years of sediment and erosion control construction site inspection experience and/or storm water pollution prevention field experience. Examples include site inspections, SWPPP coordination with contractors, installation and/or maintenance of BMPs, construction site updates of SWPPPs, etc. If your work experience is deficient in meeting either criterion, but you have similar skills that should be considered, submit a written request to the Board of Directors for an assessment of your qualification.

EMPLOYER INFORMATION

A	Company/Agency/State/City/County Name				Hours/Week Worked
	Mailing Address			Dates of Employment (<u>this is a critical section</u>)	
	City	State or Province	Zip or Postal Code	Country	
	Office Phone	Fax	Company Web Page		
	What position(s) did you hold?				
	What was your working title(s) or role(s)?				
	Primary responsibilities relating to sediment and erosion control and/or storm water pollution prevention experience.				
B	Company/Agency/State/City/County Name				Hours/Week Worked
	Mailing Address			Dates of Employment (<u>this is a critical section</u>)	
	City	State or Province	Zip or Postal Code	Country	
	Office Phone	Fax	Company Web Page		
	What position(s) did you hold?				
	What was your working title(s) or role(s)?				
	Primary responsibilities relating to sediment and erosion control and/or storm water pollution prevention experience.				
C.	Company/Agency/State/City/County Name				Hours/week Worked
	Mailing Address			Dates of Employment (<u>this is a critical section</u>)	
	City	State or Province	Zip or Postal Code	Country	
	Office Phone	Fax	Company Web Page		
	What position(s) did you hold?				
	What was your working title(s) or role(s)?				
	Primary responsibilities relating to sediment and erosion control and/or storm water pollution prevention experience.				

Application to Assess Eligibility for the CISEC Examination

Applicant Name _____

ADDITIONAL SEDIMENT AND EROSION CONTROL OR RELATED EXPERIENCES

D Below, list any sediment and erosion control inspection and construction related experience that was not covered in the above information.

APPLICATION FEE

11 Applicants who seek a review of their educational background and employment skills must complete and submit an administrative processing form and pay a non-refundable fee. Completion of these items must occur before CISEC, Inc. will begin their assessment of an applicant's qualifications. A PAYMENT FORM identifying all fees can be downloaded from www.cisecinc.org.

IMPORTANT INFORMATION!

12 • CISEC, Inc. must receive all application material (including Page 5 by three references) and a completed administrative form AT LEAST 21 DAYS prior to the examination date.

- Three references must accompany this application. At least one reference must not be a co-worker.

Please provide the names of those submitting references

1.

2.

3.

- Unless advised otherwise by CISEC, Inc., reference forms submitted with the application must be in sealed and signed envelopes. The reviewer can send their reference forms to CISEC, Inc. via mail, email, or fax.
- No applicant will be allowed to sit for an examination without written approval from CISEC, Inc.
- False statements on any part of this application may be grounds for denying or revoking a CISEC certification.

SIGNATURE, CERTIFICATION, AND RELEASE OF INFORMATION

YOU MUST SIGN THIS APPLICATION. READ THE FOLLOWING CAREFULLY BEFORE YOU SIGN.

I understand that any information I give may be verified by CISEC Inc.

I consent to the release of information about my skills, abilities, professional ethics, and work records by current and former employers, schools, and references.

I certify that I have read and will fully subscribe to the CISEC Code of Ethics (see Page 4).

I certify that all information submitted in support of this application is correct and true to the best of my knowledge and that all information regarding this application will remain confidential.

13 Signature

14 Date

CISEC, Inc. reserves the right to reject any application and/or reference form that it deems to contain fraudulent information

Send page 1 through 3, the administrative form, payment, and the three sealed reference envelopes to:

CISEC, Inc.
P.O. Box 188
Parker, CO 80134
Phone: (720) 235-2783
Fax: (303) 841-6383

CODE OF ETHICS

Certified Inspector of Sediment and Erosion Control

Article I. General Principles

1. The privilege of professional practice imposes obligations of morality and responsibility as well as professional knowledge.
2. Each Certified Inspector of Sediment and Erosion Control (hereafter called CISEC) agrees to be guided by the highest standards of ethics, personal honor, and professional conduct.

Article II. Relation of Professional to the Public

1. A CISEC shall not give a professional opinion or make a recommendation without being as thoroughly informed as might reasonably be expected of a similarly situated professional.
2. A CISEC shall not knowingly permit the use of his or her reports or other documents for any unsound or illegitimate undertaking.
3. A CISEC shall not issue a false statement or false information at any time.
4. A CISEC shall not make any sensational, exaggerated, and/or unwarranted statements in any professional opinion or in the course of performing any professional services.
5. A CISEC may publish dignified business, professional, or announcement cards, but shall not advertise his or her work or accomplishments in a self-laudatory, exaggerated, or unduly conspicuous manner.

Article III. Relation of Professional to Employer and Client

1. A CISEC shall not use, directly or indirectly, any employer or client's information in any way that would violate the confidence of the employer or client.
2. A CISEC shall protect, to the fullest extent possible, the interest of their employer or client insofar as such interest is consistent with the law and his or her professional obligations and ethics.
3. A CISEC who finds that his or her obligations to their employer or client conflict with his or her professional obligation or ethics should address such objectionable conditions or resign.
4. A CISEC who has performed an investigation for any employer or client shall not seek to profit economically from the information gained.
5. A CISEC shall not divulge any information given in confidence.
6. A CISEC shall engage, or advise his employer or client to engage, and cooperate with other industry specialists whenever the employer or client's interests would be best served by such service.

Article IV. Relation of Professionals to Each Other

1. A CISEC shall not falsely or maliciously attempt to damage the reputation of another.
2. A CISEC shall refrain from plagiarism in oral and written communications.
3. A CISEC shall endeavor to cooperate with others in the profession and encourage the ethical dissemination of technical knowledge.

Article V. Duty to the Profession

1. A CISEC shall uphold this Code of Ethics by example and encourage other CISECs to do the same.

Article VI. Conflicts of Interest

1. A CISEC shall not inspect properties under contingent arrangements whereby any compensation or future referrals are dependent on reported findings.
2. A CISEC shall not receive compensation for an inspection from more than one party unless agreed to by the client(s).
3. A CISEC shall not accept compensation, directly or indirectly, for recommending contractors, services, or products to inspection clients or other parties having an interest in inspected properties.

Application to Assess Eligibility for the CISEC Examination

Reference for Applicant: _____

The above applicant is seeking to become a Certified Inspector of Sediment and Erosion Control (CISEC) and we are seeking pertinent information that will help us evaluate his or her qualifications. Please complete the following form and return it to the applicant in a sealed envelope that has your signature across the flap. As an alternative, you can also send your reference directly to CISEC, Inc. via mail, email (examination@cisecinc.org), or fax (303-841-6383). Thank you.

REFERENCE QUESTIONS (fraudulent responses will result in the denial of an applicant's application)

- I have known the applicant: ___ less than 2 years ___ 2-6 years ___ more than 6 years
- What was your role in the relationship to the applicant
___ Supervisor ___ Subordinate ___ Colleague ___ Classmate ___ Client ___ Academic Advisor
- Are you familiar with the applicant's performance at any time during the past six years?
___ Yes ___ Yes, but less than six years ___ No
- Please rate the applicant's inspection abilities (1 = Low, 5 = High, and UTC = Unable to Comment) and characteristics that you have observed based upon recent job performances:
 I have not observed any job performances of the applicant
___ Proficiency ___ Analyze and solve problems ___ Self-discipline ___ Communication Skills
___ Resourceful ___ Trustworthy ___ Good judgment ___ Written
___ Experience ___ Technical growth and development ___ Oral
- What particular inspection strengths do you feel the applicant has that may be important?

- Do you think the applicant would be a capable and professional sediment and erosion control inspector?
___ Yes ___ No Please explain

- Please list any comments that will aid in evaluating this applicant regarding sediment and erosion control inspection experiences.

- We expect a CISEC to adhere to the mission statement provided below. Based your review of the mission statement, do you recommend this applicant to become a CISEC? ___ Yes ___ No

Mission Statement

- A CISEC will demonstrate comprehensive knowledge in the principles and practices of controlling sediment and erosion and other storm water pollutants and their applicability to discharge permit documents,*
- A CISEC will demonstrate the necessary skills to observe onsite and offsite conditions that impact the quality of storm water discharges from active construction sites,*
- A CISEC will demonstrate the ability to inspect installed best management practices and their ongoing maintenance to determine if the mitigation measures will minimize the discharge of sediment and other pollutants from active construction sites,*
- A CISEC will demonstrate the ability to communicate and report on their inspection of active construction sites as to whether storm water management compliance issues associated with water quality may exist with federal, state and/or local discharge permit regulations.*

REFERENCE CONTACT INFORMATION

Name _____
Address _____
Employer _____ Daytime Phone _____
Occupation _____ Email _____
License/Certified as _____

This form has been completed by me and represents opinions and numerical ratings about the applicant to the best of my knowledge

Signature _____ Date _____

CISEC, Inc. reserves the right to reject any reference form that has not been done by the person completing this page

Proctor Form

Do not submit the following form until you have received written confirmation from CISEC, Inc. that you have been approved to sit for the CISEC Certification Examination



THIS FORM CAN BE FILLED OUT USING YOUR COMPUTER

CISEC, Inc.
P.O. Box 188
Parker, CO 80134
Ph: 720) 235-2783
Fax: 303-841-6383
Email: examination@cisecinc.org

USA CERTIFICATION EXAMINATION ADMINISTRATION FORM

Form with fields for: First Name, Middle Initial, Last Name, Company or Agency, Mailing Address, City, State/Province, Zip/Postal Code, Office Phone, Fax, Home or Cell Phone, Email Address.

Once you have been accepted by CISEC, Inc. to sit for the Certification Examination, you will need to complete and submit this form after selecting one of the following options

Option 1: I want to sit for the Certification Examination at the following In-Person CISEC Program being held at (City and State) on (Date of Test). It is my understanding that there are no additional fees for this option and the CISEC instructor will proctor my test.

Option 2: The following person meets CISEC, Inc.'s proctor criteria as found at www.cisecinc.org and has agreed to administer my Certification Examination. It is my understanding this option requires a \$50 administrative fee as well as CISEC, Inc. approving, and receiving a signed contract from, the proctor.

Proctor Name: CISEC No.
Proctor Company or Agency:
Proctor Mailing Address:
Proctor City:
Proctor State: Zip Code: Proctor Main Phone:
Proctor Fax: Proctor E-Mail:
Enter the Test Date (if known): Enter Time of the Test (if known):

I have selected Option 2 and agree to pay the \$50 administrative fee

Payment Information: Check No. P.O. No.

Fill out the following if you are paying by credit card

VISA or MasterCard American Express

Expiration Date Security Code Exact Billing Name for Credit Card Billing Zip/Postal Code

Authorized Signature

Date

THIS FORM MUST BE SUBMITTED AT LEAST TWO WEEKS BEFORE ADMINISTRATION OF THE TEST

Signature: Today's Date:

Please send payment form and accompanying material to
CISEC, Inc.
P.O. Box 188
Parker, CO 80134
OR
Fax: 303-841-6383
E-Mail: examination@cisecinc.org
Call 720-235-2783