

# **CISEC Registration and Application Checklist**

## **LOCATION OF CISEC PROGRAM**

### **SeaGate Convention Center**

Toledo, OH

- Are you going to register for the training modules? If so, have you circled the appropriate training modules fee on the registration form? A \$50 re-processing fee may be charged if a request for a change in location occurs within 14 days before the training modules are taught.
- Are you applying for a review of your qualifications by CISEC, Inc. to sit for the certification examination? If so, have you circled the non-refundable processing fee\*\* on the registration form?
- If you want a review of your qualifications by CISEC, Inc. to sit for the certification examination, are **all lines** filled out on the application form?
- If you want a review of your qualifications by CISEC, Inc. to sit for the certification examination, do you have **three** references forms in **sealed and signed** envelopes to include with your application?
- If you want a review your qualifications, will you be sending the examination application forms, including payment, so that CISEC, Inc. **receives all material 30 days prior** to the examination date?
- Is the registration form **completely filled out** and includes circling all the fees you are paying and the method of payment?
- Send the completed payment form, examination application material, and all fees to:

CISEC, Inc.  
P.O. Box 188  
Parker, CO 80134

#### **\*\* Payment includes**

- Time and expenses for CISEC, Inc. to review the application and reference letters,
- 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.

Questions? Call 720-235-2783 or send an e-mail to [cisec\\_inc@yahoo.com](mailto:cisec_inc@yahoo.com)



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 E-mail: cisec\_inc@yahoo.com

REGISTRATION FOR THE CISEC PROGRAM AT TOLEDO, OHIO

Use a separate form for each applicant and circle fees to be paid

Registration form with fields for Name (Last, First, Middle), Company or Agency, Mailing Address, City, State/Province, Zip/Postal Code, Country, Area code, Office Phone, Fax, Home or Cell Phone, and Email Address.

MODULES REGISTRATION FEE (Prior approval is not necessary)\*\*\*

If Registering on or Before April 20, 2012 \$315
If Registering after April 20, 2012 \$345

NON-REFUNDABLE CERTIFICATION EXAMINATION ADMINISTRATIVE FEE (Prior approval by CISEC, Inc. is required to sit for the examination)\*\*\*

Applicants cannot sit for the examination until approved by CISEC, Inc. Before the review process will begin, full payment, completed application, and three completed reference forms (preferably in sealed envelopes) must be submitted at least 30 days before the examination. More information can be found at www.cisecinc.org.

Certification Examination Fee if registered for the training modules \$150
Certification Examination Fee if not registered for the training modules \$350
Certification Examination Retake Fee (CISEC, Inc. approval required) \$50
(unless advised otherwise by CISEC, Inc., retake tests do not require another application form or references)

Enter Total of Fees to be Paid \$ \_\_\_\_\_

Date of Purchase: \_\_\_\_\_ Signature: \_\_\_\_\_

Location: Toledo, Ohio Date: June 5 & 6, 2012

Administrative fees must be paid in full before an evaluation of any certification examination application material will occur

Payment Information: [ ] Check [ ] VISA [ ] MasterCard [ ] American Express [ ] P.O. No. \_\_\_\_\_

Fill out the following if you are paying by credit card

Fields for Credit Card Number, Expiration Date, Verification Code, Exact credit card billing name and zip/postal code, Authorized Signature, and Date.

\*\*\* If sufficient enrollment in the training modules does not exist, CISEC, Inc. reserves the right to reschedule and/or cancel this CISEC Program

Please send payment forms and accompanying material to CISEC, Inc. P.O. Box 188 Parker, CO 80134 OR Call 720-235-2783 for an address to deliver material by courier, Express Mail, etc.



# 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 in dark ink.

## GENERAL INFORMATION

1	NAME:				
	Last Name			First Name	Middle Initial
2	Company or Agency			Mailing Address	
	City			State/Province	Zip/Postal Code
3	Area code ( )	Area code ( )	Area code ( )		
	Office Phone	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	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.
	Have you ever attended school beyond 12 <sup>th</sup> grade? YES <input type="checkbox"/> NO <input type="checkbox"/>		

### BACKGROUND INFORMATION

7	<i>You must answer each question in this section before we can process your application</i>	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

<b>A</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.		
<b>B</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.		
<b>C.</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.		

# 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](http://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 30 DAYS** prior to the examination date.
  - Three references must accompany this application. At least one reference must not be a co-worker.
  - Unless permitted otherwise by CISEC, Inc., reference forms submitted with the application must be in sealed and signed envelopes. The reviewer can send their reference forms directly 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 (please enter the name)

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 ([cisec\\_inc@yahoo.com](mailto:cisec_inc@yahoo.com)), 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***