

National Registry of Environmental Professionals Certification Application

P.O. Box 2099, Glenview, IL 60025, Ph. 847-724-6631, Fax: 847-724-4223, email: nrep@nrep.org

This form may be used to apply for any NREP credential **EXCEPT** the
Registered Environmental Manager (REM)

for: (please check one)

- Associate Environmental Professional (AEP)
- Certified Environmental Auditor (CEA)
- Certified Environmental Systems Manager (CESM)
- Certified Indoor Air Quality Manager (CIAQM)
- Registered Environmental Property Assessor (REPA)
- Registered Environmental Laboratory Technologists (RELT)
- Registered Hazardous and Chemical Materials Manager (RHCMM)
- Registered Environmental Professional (REP)
- Certified Environmental Scientist (CES)
- Certified Refrigeration Compliance Manager (CRCM)

Please note: Each certification has its own set of eligibility criteria relating to experience and education. Please refer to the NREP website or the individual credential candidate information brochures to ensure that you meet requirements prior to submission of this application, and that you have provided the required documentation as indicated for the certification you are attempting.

Use this form to register for any one of the NREP Certifications listed above. Fill out the application completely, and include your payment information. You may refer to our [Privacy Policy](#) and [Credit Card Payment Policy](#) posted at www.nrep.org. All information provided on this application is subject to audit by the NREP. Knowingly providing fraudulent information will result in the revocation of the credential and lifetime prohibition from attaining the certification.

Attach
recent
photo here

1. GENERAL INFORMATION (Print or type clearly)

Title: (*Dr., Mr., Ms.*) _____

Name: _____

(Last)

(First)

(MI)

Title: _____

Employer: _____

Preferred Mail Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email address: _____

Certifications Held: " P.E. " P.G. Other _____

2. EDUCATION: On a separate sheet of paper list in chronological order the name, city and state of each educational institution including high school and beyond attended, if required for the certification you are attempting. For each degree claimed, attach a photocopy of an official diploma or a grade transcript. Additional specialized training courses should be documented on a separate sheet of paper.

3. EXPERIENCE: Each employment period supporting the eligibility experience requirement must be documented on the attached Experience Documentation Form, and must include the following:

§ Dates of employment in the environmental field;

§ Employer's name and address;

§ Name and title of supervisor;

§ Narrative description of roles and responsibilities.

4. ENDORSEMENT: Upon submission of an NREP Application, applicants must have their applications endorsed by a NREP credential-holder to be considered for candidacy. If a NREP credential holder is not available, another qualified professional with knowledge of certification and accreditation or an officer of the candidate's corporation may validate/endorse the candidate's claim of professional experience.

The endorser attests that the applicant's assertions regarding professional experience are true to the best of their knowledge, and that the candidate is in good standing within the environmental management industry. Endorsements must be submitted separately by the signing agent, and must be attached to a copy of the REM Experience Documentation Form.

5. EXAMINATION FEES: (check one box and circle initials of certification requested)

- CEA, CESM, REPA, CIAQM, RHCMM, RES: **\$ 250.00**
- AEP, RELT: **\$ 150.00**

6. METHOD OF PAYMENT: NREP will not accept third party payments unless the third party is a government agency, the applicant’s employer or is otherwise authorized by the NREP prior to the application submission. Payment is due at the time of registration, and must be made by check or via credit card payment. Please indicate payment method:

Check# _____ Amount \$: _____ US Dollars

Credit Card: Name on Card: _____

MasterCard (16 digits) Visa (13 or 16 digits) American Express (15 digits)

Account Number: _____ Expiration Date: ____/____/____

Credit Card Authorization: I hereby authorize a charge of \$ _____ in US dollars to my credit card as indicated above.

7. ETHICS CERTIFICATION AND ATTESTATION: I hereby attest to, and certify that, the following statements are true, correct, and accurate to the best of my knowledge, and I further agree to fulfill the obligations set forth as follows:

1. Y N I agree to give the NREP timely notice of any home or business address change in writing.
2. Y N Having read the NREP Code of Ethics and Code of Professional Practice, and NREP policies received with this application, I hereby confirm that I have not violated any of its provision in the past, and will comply with all tenants in the future. I agree to act and conduct my practice in accordance with the currently adopted Code and policies.
3. Y N I understand and agree that I am obligated to report in a timely manner any changes concerning my responses to this application to the NREP in writing.
4. Y N I have never been the subject of any professional or occupational credentialing, license, certification or registration ethics or other disciplinary matter(s) or proceeding(s).
5. Y N I have never been indicted in any matter or proceeding of felony criminal offenses.

6. Y N I understand that any intentional or unintentional failure to provide true and complete responses to this application may result in sanctions by the NREP Board of Directors or Ethics Committee.
If you answered "NO" to any statement(s) above, please provide a written explanation and attach it to this application.

8. NREP PRIVACY POLICY: I understand that a condition of certification is acceptance from the NREP of all “official correspondence.” I understand that refusal to accept “official

correspondence or issuance of a demand to have my personal information removed from the NREP data base will cause revocation of certification status. I further understand that a benefit of NREP Certification is that limited information concerning NREP Certificants is posted on the NREP online Registry and that information concerning my certification status will be shared with employers with my approval. I also understand that the NREP at times may share my contact information with outside agents promoting education and programs of interest to environmental professionals. I have indicated my willingness/unwillingness to be included in the NREP data base, the NREP published registry and to receive additional information related to environmental professionals as indicated below:

- Ⓟ I give my permission for the NREP to include my information in the NREP internal data base and to send me all “official communication.”
- Ⓟ I give my permission for the NREP to post my name, state/province of residence, and certification title(s) information on the NREP Registry.
- Ⓟ I give my permission for the NREP share USPS mail and email contact information with outside organizations promoting programs that may be of interest to environmental professionals and NREP certificants and registrants.

9. CERTIFICATION OF ACCURACY, AGREEMENT AND RELEASE

AUTHORIZATION: By signing this document, I hereby certify that the information provided in this application is true, accurate, and complete to the best of my knowledge and belief. I understand and agree that NREP has the right to contact any person, government agency/entity, or organization to review or confirm any information provided in this application. I further agree to authorize the release of any information requested by the NREP with respect to the review of this application. I further understand and agree that the NREP has the right to notify pertinent credentialing and professional organizations if it is determined that this application contains false information.

I understand and agree that NREP certification and recertification depends upon my fulfillment of all required criteria, and obligations including compliance with the NREP Code of Ethics and Code of Professional Practice. I further agree to inform the NREP, in timely manner, if I become the subject of any ethics, disciplinary, criminal, or lesser offenses, complaints, or charges.

I agree that, for research and statistical purposes only, data resulting from my participation in the certification process may be used in an anonymous/unidentifiable manner; I understand that all application material becomes the property of NREP upon receipt and that neither originals nor photocopies will be returned to me.

In the event that my certification is suspended or revoked, I agree to comply with all

directives or orders of the NREP Board of Directors and Ethics Committee, including the return of all NREP credentialing documents. I agree to comply with such directives and orders in a timely manner and at my own expense.

Applicant's Signature

Date

Applications must be sent to:
The National Registry of Environmental Professionals
P.O. Box 2099
Glenview, IL 60025-6099

NREP Experience Documentation Form

Candidate Name: _____

Date Submitted: _____

Dates of Employment	Employer's Name and Address	Name and Title of Supervisor	Narrative Description of Roles and Responsibilities Related to the Environmental Management
