



Division of Environmental and Industrial Programs



APPLICATION FOR INDIVIDUAL ASBESTOS ACCREDITATION

The University of Alabama
Safe State Environmental Programs
Alabama Asbestos Contractor Accreditation Program
P.O. Box 870388
Tuscaloosa, Alabama 35487-0388
Contact (205) 348-4666 or (800)421-7141
Fax 205-348-5343

CHECK ONE

- Initial Accreditation
- Re-Accreditation

SELECT DISCIPLINE(S)

	Annual Fees
<input type="checkbox"/> Asbestos Inspector	\$150
<input type="checkbox"/> Asbestos Management Planner	\$150
If applying simultaneously for Inspector and Management Planner the total annual fee is \$200	
<input type="checkbox"/> Asbestos Project Designer	\$150
<input type="checkbox"/> Asbestos Supervisor	\$150
<input type="checkbox"/> Asbestos Worker	\$40
Total Included \$	_____

Last Name

First Name

Company

Address

City

State

Zip

Phone

Accreditation Number

E-Mail
Receive accreditation update reminders and information on other University Programs by providing your E-mail Address (not required).

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR ALL DISCIPLINES:

- Original** Course Certificate or **Original** signed letter or roster from a Safe State registered Training Provider indicating successful course completion. (note 1)
- Valid Identification** (Copy or Original of : State-Issued Drivers License, State-issued ID Card, Passport, Military ID, or an official birth certificate)
- Photos**—Two, 1 1/4 inch X 1 1/4 inch photographs of applicant with name and accreditation number on back of photo (note 2)

PLEASE PROVIDE THE FOLLOWING ADDITIONAL INFORMATION FOR THE SPECIFIC DISCIPLINE:

- Inspector** - No Additional Information Required
- Management Planner/ Project Designer** -Official Academic Transcripts, Diploma, or Professional Certificate as evidence of meeting the educational requirements. Copy of Accredited Asbestos Inspector Certificate (note 3)
- Management Planner / Project Designer/ Supervisor**— Related Work Experience on attached pages. (may be copied if more space is needed)

I certify that the information contained herein and attached hereto is true and complete:

Signature _____

Date _____

Note 1 – Training Certificate

An original training course completion certificate(s) (**no photocopies**) issued by a Safe State registered training program or an original, signed letter or roster from a Safe State registered training program which certifies that the applicant has completed the required training course, will serve as evidence of meeting the training requirements.

Note 2 – Photos

Two photographs of the applicant are required for the Alabama Photo Identification card. Photographs shall be in color and 1¼ " x 1¼ " in size (Passport size) with the applicant's name and accreditation number (renewals) on the back of each photo. Applications submitted without photos will not be processed and may be returned as incomplete.

Note 3– Other Documents

Inspector	None
Management Planner	(1) An original training course certificate from an accredited and Safe State registered <u>Training Course for Asbestos Inspectors</u> ; (2) Official academic transcripts, high school diploma, or professional certificate as evidence of meeting the educational requirements; (3) Related work experience (pages 3 and 4).
Supervisor	(1) Related work experience (pages 3 and 4).
Project Designer	(1) An original training course certificate from an accredited and Safe State registered <u>Training Course for Supervisors</u> ; (2) Official academic transcripts, high school diploma, or professional certificate as evidence of meeting the educational requirements; (3) Related work experience (pages 3 and 4)

Send to

Questions or Information

The University of Alabama
Safe State Environmental Programs
AACAP Accreditation
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Tuscaloosa, AL 35487-0388

Phone: (205) 348-4666
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FAX: (205) 348-5343

RELATED WORK EXPERIENCE

Detailed descriptions of work experience must be included and, at a minimum, consist of the number of and dates of projects and jobs, the size of each project and job, descriptions of tasks performed, and the names and telephone numbers of supervisors on each project or job.

Complete, starting with the most recent project or job and work back. No resumes, please.

Employer _____	Address _____
Project/ Job _____	_____
Date of Project/ Job _____	Size of Project/ Job _____
Supervisor Name _____	Supervisor Phone _____

Detailed Description of Project or Job and the Tasks Performed

Employer _____	Address _____
Project/ Job _____	_____
Date of Project/ Job _____	Size of Project/ Job _____
Supervisor Name _____	Supervisor Phone _____

Detailed Description of Project or Job and the Tasks Performed

Employer	_____	Address	_____
Project/ Job	_____		_____
Date of Project/ Job	_____	Size of Project/ Job	_____
Supervisor Name	_____	Supervisor Phone	_____

Detailed Description of Project or Job and the Tasks Performed

Employer	_____	Address	_____
Project/ Job	_____		_____
Date of Project/ Job	_____	Size of Project/ Job	_____
Supervisor Name	_____	Supervisor Phone	_____

Detailed Description of Project or Job and the Tasks Performed

Employer	_____	Address	_____
Project/ Job	_____		_____
Date of Project/ Job	_____	Size of Project/ Job	_____
Supervisor Name	_____	Supervisor Phone	_____

Detailed Description of Project or Job and the Tasks Performed
