



International Certification Program  
for Environmental Samplers and  
Specialists

## *International Certification Program for Environmental Samplers and Specialists*

### **Application for Certification**

#### **Part 1: Applicant's Name and Personal Contact Information:**

First Name: \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name: \_\_\_\_\_

Title (Geologist, Engineer, Technician, etc.): \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_

City/State/Zip Code OR City/Province/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail #1: \_\_\_\_\_ E-Mail #2: \_\_\_\_\_

#### **Part 2: Applicant's Employer Information:**

Current Place of Employment: \_\_\_\_\_

Dates of Employment (e.g. May 2006 to present): \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Supervisor's Full Company Mailing Address: \_\_\_\_\_

City/State/Zip Code OR City/Province/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Supervisor's E-Mail: \_\_\_\_\_

If necessary to document practical experience records, please provide additional employment history in the environmental field (up to 3 prior employers)

Prior Place of Employment: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Supervisor's Full Company Mailing Address: \_\_\_\_\_

City/State/Zip Code OR City/Province/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Supervisor's E-Mail: \_\_\_\_\_

Prior Place of Employment: \_\_\_\_\_  
 Dates of Employment: \_\_\_\_\_  
 Supervisor's Name and Title: \_\_\_\_\_  
 Supervisor's Full Company Mailing Address: \_\_\_\_\_  
 City/State/Zip Code OR City/Province/Postal Code: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Supervisor's E-Mail: \_\_\_\_\_

Prior Place of Employment: \_\_\_\_\_  
 Dates of Employment (e.g. May 2006 to present): \_\_\_\_\_  
 Supervisor's Name and Title: \_\_\_\_\_  
 Supervisor's Full Company Mailing Address: \_\_\_\_\_  
 City/State/Zip Code OR City/Province/Postal Code: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Supervisor's E-Mail: \_\_\_\_\_

**Part 3: Certification(s) Requested\* & Application Fees**

	<b>Application Fee</b>	<b>Initial Certificate Fee</b>	<b>Total</b>
<input type="checkbox"/> Certified Environmental Sampler	\$85.00	\$65.00	_____
<input type="checkbox"/> Certified Ground-Water Sampler	\$85.00	\$65.00	_____
<input type="checkbox"/> Certified Soil Sampler	\$85.00	\$65.00	_____
<input type="checkbox"/> Certified Ground-Water Monitoring Specialist	\$85.00	\$65.00	_____
<input type="checkbox"/> Certified Monitoring Well Installation Specialist	\$85.00	\$65.00	_____
		<b>Total Due</b>	_____

\* Each certification has its own set of eligibility criteria and documentation requirements. Please refer to the NEFS web site's Certification Program page to ensure that you meet all eligibility requirements and that you can provide the documentation requested in Part 5 of this application BEFORE submitting the Application for Certification. **Incomplete Applications will not be processed.**

**Part 4: Payment Information**

Payment must accompany your Application for Certification. We are pleased to offer you the following payment options:

- Payment by Check.** Please make payment in **US Dollars** to: Nielsen Environmental Field School and mail your payment along with the completed Application for Certification and accompanying support documentation to:

Nielsen Environmental Field School  
ATTN: International Certification Program  
9600 Achenbach Canyon Road  
Las Cruces, NM 88011

- Payment by Credit Card.** For your convenience, we can accept payment using any of the following credit cards:



Card Number: _____
Name on the Card: _____
Expiration Date: _____
3 or 4 Digit (CVV) Security Code: _____
Billing Address for the Card <i>(this may be different from the office address):</i>
_____
_____
Signature of Card Holder: _____
<b>Total Charge Authorized:</b> _____

## Part 5: Documentation of Education and Experience

### 5.1 Highest Level of Education Achieved:

University or College

High School, Community College or Technical College

PhD

Diploma

Masters

Graduation Equivalency Diploma

Bachelors

Associate

Please list educational institutions attended to achieve education listed in 5.1 in Chronological order (most recent first):

Educational Institution #1:

Name: \_\_\_\_\_

City/State or City/Province: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Degree(s) Earned (e.g. B.S or B.Sc): \_\_\_\_\_

Field of Specialty (e.g. Geology): \_\_\_\_\_

Educational Institution #2:

Name: \_\_\_\_\_

City/State or City/Province: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Degree(s) Earned (e.g. B.S or B.Sc): \_\_\_\_\_

Field of Specialty (e.g. Geology): \_\_\_\_\_

Educational Institution #3:

Name: \_\_\_\_\_

City/State or City/Province: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Degree(s) Earned (e.g. B.S or B.Sc): \_\_\_\_\_

Field of Specialty (e.g. Geology): \_\_\_\_\_

5.2 Please provide **Notarized Copies** of the following documents:

- A) Your official University or College diploma in an environmental field OR official transcripts of your University/College Education; **OR**
- B) Your official University or College Diploma in a non-environmental field (or official transcripts of your University/College Education), or your official high-school diploma or GED (graduation equivalency diploma), AND a notarized statement on Company or Agency letterhead from your immediate supervisor(s) documenting at least 4 years of experience in one or more jobs involving environmental work relevant to the certifications(s) you are requesting (you may submit more than one statement to document your experience).

**AND**

- C) A copy of your Certificate(s) of Course Completion from the Nielsen Environmental E-School course corresponding to the Certifications(s) for which you are applying.

**OPTIONAL:**

- D) Documentation of additional specialized training courses attended. (List below and attach copies of course completion certificates)

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- E) Documentation of any licenses, registrations or certifications currently held

- Certified/Registered/Licensed Professional Geologist (AIPG or Individual State Programs)  
Please provide Certification/Registration/License Numbers for each program and state:

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- Certified Ground-Water Professional (NGWA) # \_\_\_\_\_

- Professional Hydrologist (P.H.) or Professional Hydrogeologist (P.Hg.) (AIH) # \_\_\_\_\_

- Professional Engineer (P.E.) Please provide License Numbers for each state:

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- Other (please specify): \_\_\_\_\_

Please provide **copies** of any Certifications/Registrations/Licenses listed above. Original documents will not be returned.

### **NEFS Privacy Policy:**

All materials contained in and attached to this Application Form become the property of NEFS and will remain in NEFS's possession throughout the application process and following review of this application. All materials will be treated with the highest level of confidentiality and will not be released to outside parties without written consent of the applicant. Successful applicants who receive Certification(s) will be listed on the ICPESS International Registry of Environmental Samplers & Specialists unless an applicant specifies in writing that he/she does not want to be included in the directory.

### **Part 6: Code of Ethics**

As an environmental professional Certified under the International Certification Program for Environmental Samplers and Specialists administered by the Nielsen Environmental Field School, I hereby acknowledge, accept and profess to abide by the following code of conduct and ethics:

- As long as my credential is in an active status, I shall endeavor to keep myself current and informed and satisfy any continuing education requirements that may be in effect for my credential.
- I will proudly represent my credentialed status and the credential itself to my professional peers, and to others.
- In the course of performing my duties, I will conduct myself in a professional manner befitting my credentialed status.
- For the sake of elevating the recognition and status of my field, I will actively encourage my professional colleagues to consider earning this credential for themselves.
- I will do nothing to undermine, detract from, or otherwise cause to develop any damaging associations with respect to this credential. I accept that any activity on my part that will cause this credential any measure of injury serves as a breach and a failure on my part to uphold this code of ethics. Moreover, I accept that such action, for which I might be responsible, could result in the revocation of my credential.
- I commit that my professional goal is to serve humankind by doing whatever I am able to do in the course of carrying out my professional responsibilities to maintain and provide a healthful environment for all.

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*Signature of Applicant*

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*Date*

**Part 7: Statement of Affirmation:**

I, \_\_\_\_\_, do solemnly swear and affirm that I am the applicant named in this Application, that I have completed this Application for myself, and that all statements and answers made in this application (including copies of requested documents) are true and made in good faith.

I further agree to fulfill the obligations of Certification under this program set forth as follows:

YES NO

I agree that NEFS has the right to contact any person, educational institution, government agency/entity, company or organization mentioned in this Application to confirm any information provided in this Application or attached copies of documentation, and I authorize the release of any information requested by NEFS with respect to review of this Application.

I agree to give NEFS timely notice of any home or business address change in writing to keep my records current.

I have read and agree with the NEFS code of ethics (Part 6) and further confirm that I have not violated any of its provisions in the past and will comply with all of its tenets in the future.

I have never been indicted in any matter or proceeding of any felony criminal offense or convicted of any felony criminal offense.

I have never been the subject of a disciplinary matter related to professional or occupational credentialing, licensing, registration or certification.

If you answered "no" to any of the statements above, please provide a written explanation and attach it to this Application.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Notary Signature: \_\_\_\_\_

Notary Seal:

Your Application will be processed within 2 weeks of receipt by NEFS. **Incomplete Applications will be returned to applicants with instructions on how to complete the Application.**

## Have You Provided Everything Needed to Complete Your Application?

Here is a helpful check list to ensure your Application will be complete:

<b>Done</b>	<b>Task to Complete &amp; Include with Application</b>
	Completed Application for Certification Form
	Selection of Certification(s) Requested
	Payment Enclosed
	Copies of University or College Diploma(s) or Official Transcripts
	Notarized Statement from Employer to Verify Work Experience
	Copy of NEFS Certificate of Course Completion
	Executed Statement of Affirmation
	Application Notarized