aci certification

Flatwork Finisher Work Experience Form

See attached instructions.

For the Certification Candidate:

ne:_____ Last four digits of SSN:_____

Address:_____ City:_____ State:_____ Zip:_____

Phone #:_____ Email:_____

Employer (during time period in Question):_____ Job Title:_____

Dates of Employment: From:_____ To:_____ = Total Months:_____
(Month/Year) (Month/Year)

FINISHING includes: concrete placement, consolidation, jointing, curing and protection, finishing, form setting, prep work, rubbing, patching, and saw cutting. Finishing does **NOT** include: employee breaks, drive time between jobs, days not worked, startup and cleanup, or any type of work not listed above.	Average # of Months **FINISHING** Per Year	Average # of Hours **FINISHING** per Week

I authorize those whom I have given as references to furnish to the American Concrete Institute (ACI) or its agents information concerning my work experience and other background relevant to the stated requirement of the ACI certification programs. I agree to release and hold harmless any individual, company or institution, including the ACI, and any persons connected therewith from liability imposed by law in furnishing such information. I understand that untruths or misrepresentation contained herein constitute grounds for denial of certification.

I hereby certify that all above information is accurate to the best of my knowledge.

Candidate's Signature:_____ Date:_____

Candidate, please provide this form to the employer listed above.

For the Employer:

1. This section is to be filled out by Human Resources or a Manager who can verify dates of employment

The information above has been provided by the candidate as his or her length of concrete finishing work experience.

Circle: **Yes** **No** The information provided above is correct. (If no, please provide corrected information in the space below)

Comments or Modifications:_____

_____

Signature:_____ Date:_____

Print Name:_____ Title:_____

Company Name:_____ Phone #:_____

2. This section is to be filled out by a Supervisor or a Manager who can verify the candidate's experience

Circle: **Yes** **No** I am or was in a direct supervisory position for this candidate.

Yes **No** Candidate is proficient in the proper use of concrete placement & finishing tools and has experience in the sequencing and timing for placing, finishing and curing concrete.

I have honestly evaluated the information being submitted on this form by the candidate. I have supplied whatever modifications that may have been necessary to make all statements herein conform to the truth, to the best of my knowledge. I submit this form in the belief that it contains no misrepresentations whatsoever.

nature of Employer:_____ Date:_____

Print Name:_____ Title:_____

Company Name:_____ Phone #:_____

Employer, please return this form to the candidate in a sealed envelope. Thank you!