





**EUMB - EPMPD**  
**Quality Management System**  
**CEA TRAINING INSTITUTION**  
**APPLICATION FORM**  
**(ANNEX C)**

Doc Ref No.:	<b>EUMB-EPMPD-CEA</b>
Effective Date:	<b>xx-xxxx-xx</b>
Revision No.:	<b>0</b>
Page No.:	<b>2 of 2</b>

*(Continue on a separate sheet if necessary)*

**Assurances:**

By signing this application form and this set of assurances, I hereby acknowledge the following conditions of the Energy Utilization Management Bureau (EUMB)/Energy Efficiency and Conservation Program Management and Technology Promotion Division (EPMPD) and agree to abide by them if this application is accredited.

1. I agree to submit complete registration/certification requirement documents and to abide by the accreditation and certification of Training Institutions.
2. I hereby authorized the EPMPD of DOE to make direct inquiries to any person, firm, or organization named in the application to verify the information submitted herein.
3. I further agree that if we provide false or misleading information on our application form or otherwise fail to demonstrate that we have sufficient experience or qualifications to perform as Training Institutions, the EPMPD has the right to suspend without prior notice my accreditation from the Registration.
4. I, the undersigned, hereby apply for the registration/certification with EPMPD and certify that, to the best of my knowledge, the particulars given in this application and all accompanying documents/information are true and correct.

NAME OF REPRESENTATIVE : \_\_\_\_\_

POSITION : \_\_\_\_\_

SIGNATURE : \_\_\_\_\_

DATE : \_\_\_\_\_