

# EUMB - EPMPD Quality Management System

## CECO APPLICATION FORM (ANNEX A)

Doc Ref No.:	EUMB-EPMPD-CECO
Effective Date:	xx-xxxx-xx
Revision No.:	0
Page No.:	1 of 2

### CHECKLIST FOR CERTIFIED ENERGY CONSERVATION OFFICER APPLICANT

One (	(1) Certified Trunology, Enginee 1) Copy of Prod 1) Copy of Sem	of Letter of Endorsement from the late Copy of any academic credential ring and Mathematics (STEM), Transf of payment for the Application Fee inar/Training Programs attended *	als and for graduates of K-12 Aca script of Records and / or Diploma;	ademic Track of Science, and			
Type of Application	*Additional for renewal application  Type of Application : New Renewal						
- Type of Applied		Now	Tronowal				
		DOE CECO APPLIC	CATION FORM				
		GENERAL INFO	PRMATION				
Name	:						
		Surname	First Name	Middle Name			
Highest Educational Attainment							
Work Expe	rience						
	re Dates n/yyyy) TO	Position Title	Name of Cor	mpany			

(Continue on a separate sheet if necessary)

Seminar/Training Program Attended \*



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Title of Seminar/Training Programs (Write in full)	Inclusive (dd/mn	Number of Hours	Conducted/Sponsored By (Write in full)

(Continue on a separate sheet if necessary)

Reference/s (Provide three (3) non-relative persons.)

#### **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 criteria for CECO.
- 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 CECO, 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 :		
SIGNATURE:		
DATE :	 	