

**INSTRUCTIONS**

This form is for Candidates seeking certification for ACI Concrete Flatwork Finisher or Advanced Finisher for work experience completed by self-employed individuals. If you are not self-employed, please fill out the *Work Experience Form*. Union participants, please see *Instructions for Union Participants*. For more information, contact ACI Certification at (248) 848-3790 or [www.acicertification.org](http://www.acicertification.org).

The Candidate completes **Section A and Section B** and then sends the entire form to the named Respondent, who completes **Section C** and sends the form directly to ACI. All information must be complete and legible.

**SECTION A—To be completed by the Candidate**

Candidate Name: \_\_\_\_\_ Certification ID/Last 4 digits of SSN: \_\_\_\_\_

Address: \_\_\_\_\_

Candidate Phone: \_\_\_\_\_ Candidate Email Address: \_\_\_\_\_

**SECTION B—To be completed by the Candidate**

Client/Customer/Owner: \_\_\_\_\_

Project Name: \_\_\_\_\_ Location: \_\_\_\_\_

Project dates from: \_\_\_\_\_ to \_\_\_\_\_ = \_\_\_\_\_  
Month & Year                      Month & Year                      Total Months

Project Type:     Residential     Commercial     Industrial     Paving     Other: \_\_\_\_\_

**Candidate Authorization to Release Information**

I authorize the Respondent to supply to ACI, or its agents, information concerning my work experience and other background relevant to the stated requirements of the ACI certification program. I agree to release and hold harmless any individual, company or institution, including ACI, and any connected persons from liability imposed by law in supplying such information. I understand that any false information or misrepresentation constitute grounds for denial of certification.

Candidate's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION C—To be completed by the Respondent**

A Candidate seeking Concrete Flatwork Finisher or Advanced Finisher certification has selected you to verify their work experience based on your professional relationship to them. Please review the information provided by the Candidate in **Section B**, and return the form to ACI.

Note that the disclaimer signed by the candidate in **Section B** above releases you from civil liability regarding statements, provided to the best of your knowledge, about the candidate, and establishes that the candidate is freely requesting that you provide this information. If any information provided in **Section B** is incorrect, inconsistent, or ambiguous, please mark and initial those corrections.

I am a client, customer, or owner of the project completed by the Candidate:                       Yes                       No  
The information provided in Section B is:                       Correct as stated                       Correct as modified

If any information provided in **Section B** is incorrect, inconsistent, or ambiguous, please mark and initial those corrections, and leave additional comments below, if necessary.

Comments: \_\_\_\_\_

I, the Respondent, have honestly evaluated the information provided on this form by the Candidate. I have supplied any modifications necessary to make all statements accurate, to the best of my knowledge. I submit this form attesting that it contains no misrepresentations or false information.

Respondent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Respondent Name (Print): \_\_\_\_\_ Phone: \_\_\_\_\_

Respondent Email: \_\_\_\_\_

**Return completed form to ACI:**  
Email: [aci.certification@concrete.org](mailto:aci.certification@concrete.org)  
FAX: (248) 848-3793

ACI Certification  
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