Installer Certification Program Application

APPLICANT'S FULL NAME:	CLASS DATE/LOCATION:
APPLICANT'S ADDRESS:	
EMAIL ADDRESS (OPTIONAL):	
EMPLOYER OR SPONSOR COMPANY INFORMATION:	
NAME:	
ADDRESS:	
PHONE NO.:	
NCI CERTIFIED INSTALLER for the following products offered	Inc. (NCI) formal training program necessary for certification as a by NCI: tal Roof Panels
experienced installer of metal roof and wall products and has products for the five (5) years immediately preceding this appl provide to NCI Group, Inc. with this application, proof of Geneshowing that there is, in force, worker's compensation insurance applicant or Employer/Sponsor have filed a petition seeking	r hereby represent to NCI Group, Inc. that: (1) the applicant is an seen actively involved in the installation of metal roof and wall ication; (2) applicant and/or Employer or Sponsor Company shall eral Liability Insurance or approved equivalent and a certificate of for applicant and/or Employer or Sponsor Company; (3) Neither relief under the Bankruptcy Code; (4) Insurance Certificate copy Compensation Waiver of Subrogation in favor of NCI Group, Inc.
recently complete including the name of a person to contact of	ject Resume that lists five (5) metal roof projects that he/she has at the project, phone number, and project address. The applicant gnated individual for the purpose of inspecting the work and/or
	Installer Certification Program, applicant agrees to attend the er the Installer Certification Program schedule or another location
applicant has completed on instructional course in the prope Inc. shall not undertake the responsibility nor obligation to: (1)	hat: (1) NCI Group, has provided training to the applicant; (2) the r installation of the products eligible for certification. NCI Group, determine if the certified applicant is utilizing the methods and certified applicant's work in order to determine whether proper d.
relationship or partnership of any kind. NCI Group, Inc. may r for any reason in its sole discretion. ADDITIONALLY, APPLICAN	
Registration & Fees: Full payment of course fee is due at time of registration. This must contact NCI in order to confirm seat availability when reg	reserves your space for the certified installer training course. You gistering. (AGEXAXE ACC) or installertraining@cornerstone-bb.com)
Course fees are XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	<mark>cant.</mark>
	ning program. Included in the fees are NCI Group, Inc. provided tion, lodging and meals shall be borne by the applicant or the
*Cancellation notices received 3 business days prior to class start day will be Cancellations inside 3 business days are subject to a minimum fee of \$50 per	eligible for a full refund or reschedule to alternate date without additional fee. individual.
Please call to check availability. Class size is limited to the first twenty-five (25) registered attendees (exceptions may apply on a per class & location basis).
APPLICANT'S SIGNATURE	DATE
	DATE
EMPLOYER'S OR SPONSOR COMPANY'S SIGNATURE	



