



| <i>SSPC Use Only</i> | Date | Initial |
|----------------------|------|---------|
| Application Verified | | |
| Supervisor Approval | | |

Prerequisite Form
SSPC Coating Application Specialist (CAS) Level 2 Certification Program
Interim Status

Document Checklist - Your completed packet must be submitted to SSPC no later than **two weeks** prior to the start date of the course and include the following:

_____ Prerequisite Form

_____ Picture for your wallet card (.jpg file named as First_Last.jpg – max size: 2mb)

Send to:

SSPC Training Coordinator
 800 Trumbull Drive
 Pittsburgh, PA 15205-4365

Phone: 412-281-2331 x2241
 Fax: 412-444-3591
 Email: prereqs@sspc.org

**Please note: Filling out this form does not register you for the course.
 You must pay in full by check or credit card before you are officially registered.**

IMPORTANT!

If prerequisites are not received within 30 days of the completion of the course, students will be required to register for the online recertification exam at the cost of \$250 in addition to submitting the required forms; and will be listed as Training Only students until they complete the necessary certification requirements.

Data Privacy Notice

SSPC is concerned about protecting the privacy of our students. If you pass the course or certification exam, you have the option of having your name and contact information made available on our website via a public search for coatings professionals. You must opt-in if you wish to be included in the search, otherwise your information will not appear.

Please check the appropriate box below:

_____ **Yes**, I want my contact information to appear on the SSPC website.

_____ **No**, I do not want my contact information to appear on the SSPC website.

Applicant Information

Please list your name as you would want it to appear on your certificate

SSPC Member ID Number: _____

Course Date: _____ Course Location: _____

Last Name: _____ First Name: _____ Middle: _____

Company Name: _____ Job Title: _____

Street Address of Applicant: _____

City: _____ State: _____ Zip/Postal Code: _____

Phone: _____ E-Mail Address: _____

Human Resource Contact Person: _____

HR Phone: _____ HR E-Mail Address: _____

Professional References

SSPC requests that you list three professional references.

Please note: At least one professional reference must be a supervisor who can attest to the work performed, hours submitted and the ethics of the applicant.

| | Name | Phone | Email Address |
|---|------|-------|---------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |

Prerequisite Information

Potential examiners must meet the following prerequisites (please check selected process):

| | | Work Experience | Training History |
|--------------------------|-----------|--|--|
| <input type="checkbox"/> | Process A | Minimum 2,000 total hours (equivalent to 2-years work experience) | 150 hours of accepted, formal training |
| <input type="checkbox"/> | Process B | Minimum 3,000 total hours (equivalent to 3-years work experience) | N/A |

Total work experience hours are to be accumulated over applicant's comprehensive work history in the field of coating application.

Please check off the exam(s) that you plan to take:

- CAS Level 2 (Interim Status) – Written Exam
- CAS Level 2 (Interim Status) – Hands-On Blaster Exam
- CAS Level 2 (Interim Status) – Hands-On Sprayer Exam

** Written Exam also available in Spanish, Portuguese, and Greek, if requested. Please check boxes below if applicable*

****Only check off boxes below if applicable***

- CAS Level 2 (Interim Status) – Written Exam in Spanish
- CAS Level 2 (Interim Status) – Written Exam in Portuguese
- CAS Level 2 (Interim Status) – Written Exam in Greek

Signed: _____ Date Submitted: _____

Work Experience

This section is to be completed in reverse chronological order, starting with your most current employer. You may duplicate as many copies of this page as is necessary for complete documentation of your work history.

Related work experience is defined as work as an abrasive blaster and spray painter in an industrial or marine environment. Eligibility is subject to verification by SSPC.

The following information must be included in your description:

- **Type(s) of blasting and painting work performed**
- **Type(s) of surface preparation equipment used**
- **Type(s) of coatings applied**
- **Type(s) of structures worked on**

Please note: Supervisory experience is not sufficient.

| | | | | | | | |
|---------------------|--------|-------|-------------|-----------------------|-------|--|--|
| Employer: | | | | | | | |
| Title: | | | | | | | |
| Address: | | | | | | | |
| Supervisor's Name: | | | | Title: | | | |
| Work Phone: | | | Cell Phone: | | | | |
| Responsibilities: | | | | | | | |
| Employed From: | Month: | Year: | To | Month: | Year: | | |
| Reason for Leaving: | | | | Approx. hours worked: | | | |

| | | | | | | | |
|---------------------|--------|-------|-------------|-----------------------|-------|--|--|
| Employer: | | | | | | | |
| Title: | | | | | | | |
| Address: | | | | | | | |
| Supervisor's Name: | | | | Title: | | | |
| Work Phone: | | | Cell Phone: | | | | |
| Responsibilities: | | | | | | | |
| Employed From: | Month: | Year: | To | Month: | Year: | | |
| Reason for Leaving: | | | | Approx. hours worked: | | | |

Training History

Accepted formal training includes:

1. Any SSPC In-Person or On-Line Training Course. SSPC courses range from 8 to 40 hours and can be found at: <https://www.sspc.org/training-certification-a-z-list/>.
Please note: The recommended training program for candidates to fulfill their training requirement is the [SSPC Trainthepainter Program](#) (TTP). The TTP Program has 76 Coating Application, 25 Abrasive Blast Cleaning, and 15 Spray Painter lecture modules. The program includes 39 step-by-step hands-on workshops, equating to approximately 80-hours of training material. These training modules map to our certification level exams. This includes [CAS \(level 1 and 2\)](#), [C6](#), [C7](#), and [C12](#).
2. Professional Development or Continuing Education: SSPC, NCCER, IUPAT, FTI application specialist training, college, apprenticeship or trade school courses in the sciences, math, English or equivalent that meet the SSPC Transition Plan Body of Knowledge. The SSPC program administrator must approve any formal training and the candidate must submit the training certificate for the course.
3. OSHA 10 - Occupational Safety & Health Issues Course (10-hours) or OSHA 30 (30-hours).
4. Lead Health and Safety Training
5. Documented Supplier Training on equipment operation or application/handling or material
6. Toolbox and other Safety and Health Training
7. Local Shipyard or Local Safety/Council or Chemical/Refinery Plant Training related to coatings
8. SSPC Applicator Training delivered by an Instructor approved to provide the ATT Curriculum
9. If a contractors' Quality Control Supervisor leads a coatings course to his workers, SSPC will accept this. We would need a copy of the course curriculum, and the duration of the course in hours.
10. If a certified CAS person teaches a 20+ hour coatings course, SSPC will accept this. We would need a copy of the course curriculum and the number of hours that the course is.
11. Level One – Essentials of Paint and Painting Technology (Certification MPI ACT – MPI Architectural Coating Technologist)

Please describe any formal training courses you have completed below:

| | | | |
|---|--|-------------|--|
| Organization offering course: | | | |
| Course name: | | | |
| Date(s) of course: | | # of hours: | |
| Instructor name(s): | | | |
| Describe any topics presented and/or workshops within the course: | | | |
| Was there an exam given? | | Grade: | |

| | | | |
|---|--|-------------|--|
| Organization offering course: | | | |
| Course name: | | | |
| Date(s) of course: | | # of hours: | |
| Instructor name(s): | | | |
| Describe any topics presented and/or workshops within the course: | | | |
| Was there an exam given? | | Grade: | |

Have you taken SSPC's Trainthepainter (TTP) Program to prep for this exam?

Yes (Date): _____ No: _____

By my initialing and signing below, I acknowledge that I have read and understand:

(Initial) _____ The CAS Level 2 – Interim Status prerequisite form and instructions

I do hereby certify that I have read and met the above prerequisites for the Coating Application Specialist (CAS) Level 2 Certification Program - Interim Status

Signed: _____ Date Submitted: _____

Name & title (please print): _____

(Initial) _____ I acknowledge that failure to report accurate, complete information will delay my application. Omission or falsification of information or failure to answer all questions truthfully will result in withholding or denial of certification status.