



Certified Water Technologist (CWT)

Application Handbook

APPLY
3 Steps to Certification: 1. Pass 2. Apply 3. Recertify

1300 Piccard Drive Suite LL 14 Rockville, MD 20850 P (301) 740-1421 F (301) 990-9771 http://www.awt.org



Information in this handbook represents current policies and procedures for AWT's Certified Water Technologist (CWT) program. Information in this handbook supersedes information contained in any previously published material.

All information and guidelines are subject to change.

Please read and understand the entire handbook, including all policies, procedures, and consequences.

Certified Water Technologist (CWT)

Congratulations! You are ready to complete the second part of the CWT process. Having been notified that you passed the CWT exam, you are now eligible, and encouraged, to apply to become a CWT. The sought after CWT designation is the standard of excellence in the field of water treatment. Individuals with this status have personally committed themselves to distinction in the water treatment industry.

What does it mean to be a CWT?

A CWT has passed AWT's CWT examination—a rigorous, 200-question, exam that covers all aspects of water treatment technology, from best practices to regulatory compliance and safety—and been employed as a water treatment professional for a minimum of five years. A CWT has also signed a 13-part Declaration of Ethics, agreeing that the principles of honesty, integrity, commitment to conservation of resources, and excellence will govern every business relationship he or she forges.

Checklist

Before you submit the application, have you:
☐ Read the handbook cover to cover
☐ Read and agree to be bound by the AWT Code of Ethics, policies, and procedures as outlined in this handbook
☐ Filled out the application form in its entirety
☐ Signed your application form
☐ Completed the work experience forms
☐ Made a copy of your entire application for your records
☐ Solicited your four references
☐ Made four copies of pages 13-14, enclosed a stamped addressed envelope to AWT Headquarters, and mailed them to your four references
☐ Paid the appropriate application fee
☐ Mailed your application packet to:
AWT
Certification Program
1300 Piccard Drive, Suite LL 14
Rockville, MD 20850

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A. Certification

To become a CWT, you must (1) pass the CWT exam and (2) submit a completed application, with all necessary supporting documents, to AWT Headquarters (see Appendix A).

When an application is received at AWT Headquarters, it is checked for completeness and to determine whether the applicant meets the criteria for consideration. The applicant may be contacted for clarification and additional information if necessary.

When the applicant's file is complete (i.e., a CWT application with the applicable payment and four references have been received by AWT staff), the file is forwarded to a Certification Committee member for review to ensure that all criteria have been met by the applicant. The reviewer is asked to confirm that there is no conflict of interest before undertaking the application review. A favorable decision by the reviewer, who is a current CWT, is required for approval, resulting in certification of the applicant. A CWT application reviewer can request additional information or clarification. Unless the applicant specifically requests his/her application be reviewed before taking the exam, the file will be submitted after the applicant has successfully passed the exam.

AWT Headquarters will advise the applicant when a decision has been reached by the reviewer. If the applicant is accepted for certification, the applicant is sent notification of certification, a certificate, and a CWT card with their certificate number and recertification date printed therein, which they can then use to demonstrate to customers that they are certified. Applicants should allow four to six weeks for the application process to be completed after the reviewer has received it. Applications are reviewed on a first submitted, first reviewed basis.

AWT regrets that it cannot accommodate requests made to obtain certification on an expedited basis. If the applicant is not accepted, they will be advised of the basis for nonacceptance. It should be noted that there are several common reasons for major delays in processing applications: incomplete applications, applications submitted in any format other than the approved format, and applications containing requests for exemptions or modifications to any program requirements.

B. Appeal Process

If you do not meet the criteria to become a CWT, you will receive a letter stating why you are not eligible. You can appeal this decision simply by stating that you wish to do so, in writing, to staff at AWT headquarters, or by fax at (301) 990-9771, **within 30 days** of receipt of your letter of denial. If you decide NOT to appeal, you have 30 days from receipt of your letter of denial to state that you do not wish to appeal the decision and to request your refund. Upon receipt of your written request, we will send your refund, minus a \$75 processing fee.

C. Time Limitation for Completion of Certification Application

IMPORTANT: Applicants have 12 months to complete the certification process from the date of being notified that they have passed the certification exam. Applications on which there has been no activity for one year or more will be considered "inactive," will be deleted from the list of pending active applications, and will receive no further reminders from AWT. Reapplication will require repayment of the full appropriate fees in effect at the time of reapplication.

D. Fees

CWT Processing Fee:

Members: \$260.00 NonMembers: \$515.00

Additional Certificate Charge:

Ordered in advance, with this application: \$12.00 each*

*Note: Due to the considerable time and expense associated with processing, we strongly recommend that CWT candidates request duplicate certificates (if desired) in advance. Please be sure to indicate on your CWT application that you would like additional certificates. Simply specify how many total certificates you desire and enclose the appropriate fee. The first certificate is complimentary.

E. Validity Of Certification

CWT certification is valid for five years. During that time, you are entitled to use the CWT designation after your name to indicate that you are certified. You will receive a certificate, and AWT will also list your name on the CWT page on the website. It is your responsibility to keep AWT informed of any changes to your personal contact information.

E. Other Information

(I) Website

A digital version of this Certified Water Technologist Application Handbook is available on the AWT website at http://awt.org.

(II) AWT Staff

AWT staff can be reached Monday through Friday between 8:30 am and 5:00 pm (Eastern Standard Time). You may contact AWT staff at the following address:

AWT

Certification Program 1300 Piccard Drive, Suite LL 14 Rockville, MD 20850

Phone: (301) 740-1421 Email: <u>apike@awt.org</u> Fax: (301) 990-9771

(III) Address Change

AWT makes every effort to keep the most current mailing addresses of candidates and CWTs. However, your assistance in this regard is essential. If you move your employment or change your mailing address, please update your contact information.

G. Application Directions

Failure to follow directions and/or legibly complete this application will result in summary rejection of this application. For your application to be considered:

- 1. You must complete and return the enclosed application (see Appendix A).
- 2. You must meet the work experience requirements, completing pages 11 and 12.
- 3. You must submit four appropriate references. Reference forms should be mailed directly from your references to AWT staff. Applicants should not see the completed reference form. It is suggested that applicants enclose a preaddressed stamped envelope to AWT Headquarters when sending the reference form to their references. References must be of managerial level or higher. For this purpose, a manager is defined as an individual who has personal responsibility for people and/or programs and/or processes.
- 4. You must pay the appropriate application fees.
- 5. All information requested on the accompanying forms must be legibly printed in **black ink** or typewritten and suitable for photocopying.
- 6. All information requested MUST be provided. Incomplete applications will be rejected.
- 7. Completed forms must be accompanied by the appropriate fees in U.S. dollars, made payable to AWT. Refer to Section D to calculate applicable fees.
- 8. Make and keep a copy of your forms for your records. AWT can assume no responsibility for forms lost in transit.
- 9. Completed forms should be mailed or faxed to:

AWT

Certification Program 1300 Piccard Drive, Suite LL 14 Rockville. MD 20850

Fax: (301) 990-9771

For assistance, please contact AWT staff at (301) 740-1421.

H. Application Forms Index

1. Applicant Information

- a. Applicant name, address, and phone number
- b. Applicant affidavit
- c. Fee calculation worksheet
- d. Names of your qualification references
- e. Other information

2. Declaration of Ethics

3. Work Experience Documentation

- a. Work Experience Form 1: Summary of Water Treatment Work Experience
- b. Work Experience Form 2: Individual Job Experience

4. Qualification References

Important!!!! - Before you mail this application, check to be sure you have done the following:

- a. Completely filled out this application.
- b. Enclosed a credit card number with expiration date, money order, or check made payable to AWT for the correct amount, in U.S. funds.
- c. Provide all information requested. **Do not submit documentation in excess of what is requested. Excess documentation will not be considered as part of your application.**
- d. Distributed the **qualification reference** forms to four individuals who will complete and return the forms to AWT. It is advisable to provide each reference with a pre-addressed stamped envelope to AWT to expedite this process. References must be of managerial level or higher.

Note: AWT accepts no responsibility for delays caused by incomplete, inaccurate, or illegible information.

Appendix A

Certified Water Technologist (CWT) Application*

*To be completed AFTER you have been notified that you passed the CWT exam.

1a. Applicant Name, Address, and Phone Number

Last Name		First	MI	
Home Address				
Home Phone				
City		State	ZIP	
AWT Member: ☐ Yes	□ No			
Company Name				
Business Address				
Business Phone	Fax	Email		
City		State	ZIP	
Other Certifications held				
1b. Applicant Affic	davit			
		se information in connection with disciplinary procedures against n		r recognition
Signature			Date	
Printed Name				

1c. Fee Calculation Worksheet			
How many additional certificates would you like t Members\$260.00 Nonmembers\$515.00 Extra Certificate\$12.00 each	o purchase now, at \$12/ead	ch?	
1d. Payment			
Payment Method			
☐ Enclosed is a check payable in U.S. dollars to			
\square Enclosed is a money order payable in U.S. dol			
□ Please charge my: □ Visa □ MasterCard □	l Amex		
Credit Card Number	Security Code	Expiration Date	
Name on Card	Signature		

Note: Full payment of fees must be made before an application will be reviewed.

1e. Names of Your Qualification References

A qualification reference is a person who will vouch for your technical competence. Four qualification references are required. You are asked to provide the names of four individuals, unrelated to you and not more than one from any company, who have personal knowledge of your employment and/or teaching, knowledge, and expertise in the field of industrial water treatment. Acceptable references include current CWTs, present supervisors, present clients, previous supervisors, previous clients, professors, and instructors, and must be of managerial level* or higher. Employees of companies who sell goods and/or services to water treatment companies are not acceptable as references. Provide no more than one reference from your present employer, however, individuals employed by and performing water treatment for a single company at multiple locations may provide more than one reference from that entity, provided that the references are at an "arm's-length" distance from each other within that organization. To qualify as an arm's length relationship, none of the references should have any interest in the consequences to the others.

NOTE: You are to send each of these individuals a **Qualification Reference Form,** which they should complete and return directly to AWT. It is strongly recommended that you enclose a stamped pre-addressed envelope to AWT Headquarters with your reference form to make it more convenient for your reference to mail. It is your responsibility to follow up with these people to ensure that they complete and return the form.

Qualification Reference Name #1; Job Title; Company		
Qualification Reference Name #2; Job Title; Company		
Qualification Reference Name #3; Job Title; Company		
Qualification Reference Name #4: Joh Title: Company		

* For this purpose, a manager is defined as an individual who has personal responsibility for people and/or programs and/or processes.

1f. Other Information

Educational Background (Optional):

Include only if you desire work experience credit for education. Twelve months credit is given for a college degree in any field. An additional six months is granted for a degree in any technical discipline. You must submit a copy of your diploma.

Name of College or University Degree Received and Date Awarded:

Non-Water-Treatment Work Experience (Optional)

Include only if you desire work experience credit for non-water-treatment-related employment. Three months credit, up to a maximum of one year, is given for each year worked in plant or facilities engineering, operations, or maintenance. Please attach a copy of this page if additional space is needed.

Summary of Non-Water-Treatment Work Experience

From (Mo/Yr):/ To (Mo/Yr):/		
Job Title	Company Name	
Brief Job Description		
From (Mo/Yr):/ To (Mo/Yr):/		
Job Title	Company Name	
Brief Job Description		

Other Optional Data:

Please provide any additional information you wish to have considered by the reviewer (such as, but not limited to, education not included above, your published articles on water treatment subjects, other technical papers or books that you have written or co-written, any patents you have obtained as a direct result of your efforts). You may attach a maximum of two single sided-pages of additional information if you desire. Attachments of more than two single-sided pages will be returned to you without review and will not be considered as part of your application.

2. Declaration of Ethics

I hereby:

- (a) Recognize and acknowledge that the proper control of industrial water treatment problems can be critical to the safety and welfare of the general public and industrial facilities.
- (b) Recognize and acknowledge that the control of industrial water treatment problems is obligatory to maximize conservation of our material resources and to reduce economic losses.
- (c) Recognize and acknowledge that the entire field of industrial water treatment encompasses the application of the knowledge and experience of many diverse disciplines and levels of technical competence that must often be consulted.
- (d) Recognize and acknowledge that only through continual association and cooperation with others in this field can the safest and most economical solutions be found to the many types of industrial water treatment problems.
- (e) Recognize and acknowledge that the quality of my work reflects on the entire industrial water treatment profession.

For these reasons, I:

- (a) Agree to give first consideration in my water treatment work to safety and public welfare.
- (b) Agree to apply myself with diligence and responsibility to the water treatment work that lies within my area of competence.
- (c) Agree to pursue my work with fairness, honesty, integrity, and courtesy, ever mindful of the best interests of the public, my employer, and of fellow workers in the field of industrial water treatment.
- (d) Agree to not represent myself to be proficient or make recommendations in phases of water treatment work in which I am not qualified by knowledge and experience.
- (e) Agree to avoid and discourage untrue, sensational, exaggerated, or unwarranted statements regarding my work or products in oral presentations, written texts, or advertising media.
- (f) Agree to treat as confidential my knowledge of the business affairs or technical process of clients, employers, or customers when their interests so require.
- (g) Agree to inform clients or employers of any business affiliations, interests, or connections that might influence my judgment.
- (h) Agree to uphold, foster, and contribute to the achievement of the published objectives of the AWT.

I understand that my failure to comply with these requirements could result in disciplinary action against me.

Signature	Date
Name (Print)	

3. Work Experience Documentation

Carefully read these directions before proceeding.

a. Make as many copies of Work Experience Forms 1 and 2 as required.

NOTE: For the purpose of these forms, "job" is defined as "a position in which you are/were regularly employed for a period of time." For example: "I had a job with AAA Chemical Company as a sales representative for two years." Work performed as part of an educational experience (e.g., work study, summer jobs, graduate research) may be included. You may have had more than one job per employer, (e.g., if you were promoted).

- b. Completely fill out one copy of **Work Experience Form 2** for each job you want included in your work experience assessment. If you move from one job to another with the same employer, you must fill out separate forms for each job. You must provide complete information. If you are self employed, provide names and addresses of specific individuals at major clients who can verify your work history.
- c. Summarize the information from each copy of **Work Experience Form 2** you completed onto **Work Experience Form 1: Summary of Water Treatment Work Experience**.
- d. Arrange your forms in order of most recent experience first, followed by less recent experience. Number pages consecutively. If you have 12 pages of forms, the first page is page 1, and the other pages should be numbered 2 through 12.

3A. Work Experience Form 1: Summary of Water Treatment Work Experience

Make and use as many copies of this form as needed. Please provide the information requested per the directions provided. Information must be printed legibly in black ink or typed. Illegible information can seriously delay, or even stop, your application process.

Please summarize below the information that you have detailed on each copy of Work Experience Form 2:

Individual Job Documentation

From (Mo/Yr):/ To (Mo/Yr):/	
	Company Name
Brief Job Description	
From (Mo/Yr):/ To (Mo/Yr):/	
Job Title	Company Name
Brief Job Description	
From (Mo/Yr):/ To (Mo/Yr):/	
Job Title	Company Name
Brief Job Description	

3B. Work Experience Form 2: Individual Job Experience

Job Information

Use one of these forms for each period of work experience ("job") you wish to document. Make and use as many copies of this form as you need. Please provide the information requested per the directions and definitions provided. For assistance with this form, contact AWT Headquarters.

From (Mo/Yr):/ To (Mo/Yr):/	1		
			
Job Title	Company Name		
From (Mo/Yr):/ To (Mo/Yr):/	<u>'</u>		
Job Title	Company Name		
Who can AWT contact to verify	this experience?		
Name			
Company			
Address			
City		State	ZIP
Phone	Fax		

Please describe in detail, on a separate sheet, your water treatment-related duties in this job.

4. Qualification Reference Applicant

Make four photocopies of this form. Legibly (typewritten or printed in **black ink**) complete Items **4a** and **4b**, and forward this form to the **four people** you have listed as references in section **1D** on your application. **Ask these individulals to complete the rest of the form and return it directly to AWT**. This is your responsibility, and you should follow up with these references to ensure that the form has been completed correctly.

these	e references to ensure that the form has l	peen completed correctly.
4a. A	pplicant's full name	
4b. C	contact Information of person who is fam	iliar with the employment covered on this form:
Referer	nce Name	Job Title
Compa	ny	
Addres	S	
City	State	ZIP
Phone	Fax	Email
by the	e Association of Water Technologies (AWT complete the information requested on b	s submitted your name as a reference in his or her application for certification. 7). This recognition is very important to the applicant, and it is requested that oth pages of this form as quickly as possible and send it directly to:
1300	Certification Program Piccard Drive, Suite LL 14 ville, MD 20850	
4с. А рі	cceptable qualification references includ revious supervisor(s) of the applicant; pro	al and should not be sent to the candidate. le: Current CWTs; registered or chartered engineers; present and/or esent and/or previous clients of the applicant (at minimum, reference has ent organization); and/or professors and instructors.
Pleas	se check the appropriate box(s) and com	plete the information beside it.
I am:		
□ A\	WT Certified, Certificate Number :	
	registered engineer: State Branch:	
□ A	present or previous supervisor of applic	ant
	present or previous client of applicant	
□ A	previous professor or instructor of appli	cant
4d. I I	have known the applicant for	years.
4e. Fı	rom personal knowledge, my assessmen □ excellent □ average □ below aver	t of the applicant's character and personal reputation is that it is (check one) rage \square I do not know
4f. Fr	om personal knowledge, I know that the qu □ excellent □ average □ below aver	ality of the applicant's work in the field of industrial water treatment is (check one rage \square I do not know
tre	years ("industrial water tre eatment at any level, the investigation of o	that the applicant has been engaged in industrial water treatment work for eatment work" being defined as "work in the field of boiler and cooling water corrosion, scaling and deposit mechanisms, and/or the investigation, designated procedures, and/or the teaching of water treatment related technology
	he applicant is proficient in the following	

Signatu	ire Date
4k. O	ther comments (optional, not required)
the	e project or activity, the degree of knowledge or skill required, etc. Additional sheets may be attached.
inc the	ease describe some of the major projects or activities in which the applicant has been engaged in the field of dustrial water treatment. Describe only those where you had personal knowledge of the applicant's work. Describe ese briefly, but give enough detail to show the degree of responsibility exercised by the applicant, the complexity of
	atment you have described in item 4h ?

Please mail the completed form to:

AWT Certification Program 1300 Piccard Drive, Suite LL 14 Rockville, MD 20850

or Fax: (301) 990-9771