Certified Instructor (CI) Independent Operator

**Application**

## þÿInternational Window Cleaning Association

**About Certified Instructors**

The International Window Cleaning Association (IWCA) grants the Certified Instructor designation to individuals who have demonstrated their continuing commitment to IWCA educational efforts and participation in the IWCA safety and training programs. It may be granted to individuals who have demonstrated the same commitment and participation in other industry organizations as it pertains to the safety and training of workers in specialized fields or who use specialized equipment and techniques.

The Independent Operator program is for any individual or company who currently offers safety courses other than IWCA Safe Practices for Rope Descent Systems (RDS) or OSHA 1910 Safety Training for Window Cleaners and plans to charge a trainer/evaluator fee for money for the certification course training.

With regards to Authorizing or Certifying workers in the Safe Practices for Rope Descent Systems; only an IWCA Certified Instructor may train to IWCA RDS Standards and agrees the IWCA is the only body enabled to issue Authorization or Certification of Rope Descent System Operators. A CI agrees to use all testing and evaluation methods developed by the IWCA for Safe Practices for RDS.

IWCA’s CI program is designed for the window cleaning and/or safety training professional who is dedicated to providing the most current safety training education to any and all window cleaning or other building maintenance professionals, but who does not participate in field work every day.

Prerequisites:

* Minimum 7 years in the window cleaning or building maintenance industries.
* Minimum 5 years providing training and or instruction to building maintenance technicians.
* Successfully pass the IWCA OSHA 1910 Safety Training Program
* Successfully pass the IWCA Authorized Rope Descent System Operator Program
* Teach or Co-Teach One (1) or more IWCA Safety Trainings with any CI
* Demonstrate Training Abilities to CI
* Approval and vote by the Full Board of Directors

Applicants shall also provide verifiable documentation as required on page 3 of this application.

Upon being granted the CI designation, an individual reaffirms his or her commitment to the importance of proper safety and training for those working within the window cleaning and exterior building maintenance fields.

IWCA CI’s are required to uphold the mission statement and code and ethics of the Association.

IWCA CI’s are required to pay license fees to IWCA for each training provided.

IWCA CI’s are required to pay an annual fee to the IWCA to uphold their Certified Instructor Designation

IWCA CI’s are expected to promote IWCA Safety Training.

An IWCA CI cannot certify employees who they may be related to or who are working under their direction.

IWCA CI’s shall undergo annual performance reviews by the IWCA.

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## þÿInternational Window Cleaning Association Certified Instructor (CI)

**Certified Instructor Application**

Return this application to IWCA along with proof of completion of the required courses (or exemption documentation).

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| --- | --- |
| *First Name* | *Last Name* |
| *Company Name* |
| *Company Address* |
| *City* | *State Zip Code* |
| *Phone* |
| *E-mail* |
| *Position in Company* | *Since What Year* |
| *Please provide a brief biography or resume and attach to this application:* |
| *The signature below is that of the individual seeking qualification for the “Certified Instructor” (CI) designation. By signing this application, the person seeking this CI designation is noting that the information is true and accurate to the best of his/her knowledge.* |
| *Applicant’s Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date: \_\_\_\_\_\_\_\_* | *Witness**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date: \_\_\_\_\_\_\_\_\_* |
| ***Application Fee for 3 year Certification: $500 (Renewal 30 PDU’s plus $300)*** |  *Check Number*  *Credit Card* |
| *Credit Card Number* | *Exp. Date Card Code* |
| *Credit Card Signature* |

**Certified Instructor Point System**

Please indicate which activity you are submitting for points by checking the boxes next to the activity.

In addition, you will need to submit the appropriate paperwork to prove your attendance, etc. for each item. For example, if you have completed OSHA 10 training, you will need to provide a copy of the certificate and/or card with the rest of your paperwork. If you’ve attended a safety training course, please submit your certificate of attendance. No more than 25 (when possible) of the points can be from any one category.

To qualify, applicant must earn a total of 80 points plus Co-Teach an IWCA Safety Training with a Certified Instructor of the IWCA with an approval evaluation signed off from the same Certified Instructor to present to the IWCA Board of Directors for Final Vote and Approval..

##### IWCA

* Membership in IWCA-1 point for each consecutive year a member, Not to exceed 10 points (Note years as member ).................. **10 pts** (Must be able to be verified by IWCA Management Office)
* Record of Service on the BOD of the IWCA for at least 3 years

(Note years as Member of BOD )............................................... **10 pts**

(Must be able to be verified by IWCA Management Office)

* Number of IWCA Conventions Attended

(\_\_\_\_\_\_\_\_\_\_\_\_\_)............................................. **2 pts per convention attended**

(Must be able to be verified by IWCA Management Office)

* IWCA Authorized Rope Descent System Operator Course....**REQUIRED**

(Must provide copy of certificate and/or card)

##### SAIA

Complete and Previously Pass Scaffold Access Industry Association (SIA)

 Supported Scaffold Program and Exam.......................................... **25 pts**

 Suspended Scaffold Program and Exam ........................................... **25 pts**

(Must provide copy of certificate and/or card)

##### OSHA

* Complete and Previously Pass OSHA 10 Course........................... **10 pts**

(Must provide copy of certificate and/or card)

##### OR

* Complete and Previously Pass OSHA 30 Course........................... **30 pts**

(Must provide copy of certificate and/or card)

* IWCA OSHA 1910 Safety Training Course.............................**REQUIRED**

(Must provide copy of certificate and/or card)

##### SPRAT/IRATA

 SPRAT or IRATA Certification-Level 1.............................................. **25 pts**

(Must provide copy of certificate and/or card)

##### OR

 SPRAT or IRATA Certification-Level 2.............................................. **35 pts**

(Must provide copy of certificate and/or card)

##### Memberships

 Membership in SIA, BOMA, IFMA, IREM, PWNA,

BSCAI, SWRI, IRATA, SPRAT, ASSE, ISFP, ISSA. 5 pts per

association, not to exceed 15 ................................................................ **15 pts**

(Must provide copy of current membership certificate or documentation)

##### Other Training Courses

* Complete Boom/Scissor/Lift Safety and Training Course ............ **15pts**

(Must provide copy of certificate and/or card)

* Teach or Co-Teach IWCA Safety Training Course………………….**REQUIRED**
* Other Fall Protection or Safety Programs approved by the

IWCA Board of Directors........................................................................ **10 pts max**

(must submit program for approval)

**Completed CampusIWCA Training Programs**

Complete Foundations: Window Cleaning Starts Here………..**4 pts**

Complete Water-fed Pole Safety and Efficiency/Technique…..**2 pts**

Complete OSHA WWS Presentation…………………………….**1 pt**

Complete Plan Ahead for Safety………………………………….**4 pts**

Complete Rope Descent Systems………………………………..**6 pts**

Total Verifiable and Approved Points (80 Points Minimum)............................................................................................................................... **points**

##### Submission

Please note that the designee shall submit all verifiable copies of certificates/ cards documentation for each category noted above to the IWCA office at:

**IWCA Headquarters**

**PO Box 2092, Maryland Heights, MO 63043**

***If you have any questions, please contact us at 314-605-7902.***