



Certification Application

Guardrail Installer

The information requested in this application will aid in determining your eligibility for certification as a Guardrail Installer. Read and follow the instructions carefully. In addition, it is important to remember:

- The information you provide must be complete, accurate, and specific.
- All information furnished on this application is subject to verification.
- Please do NOT return these instructions with your application. A copy of the Code of Ethics should be retained for your files.
- Certification is valid for four years from the date the course is taken.

Minimum Eligibility Requirements

The following requirements must be met before you can be certified:

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- Successfully complete the Guardrail Installation training course with a minimum score of 80%
- Have one year (2,000 hours) guardrail installation experience (including installation, maintenance, removal, and inspection of products and systems), of which 1,000 hours MUST be in a foreman or supervisor capacity
- Have training on products/systems that are used in your area (complete the attached checklist)
- Provide two professional references who can verify your experience
- Be approved by the ATSSA Certification Board

Application Instructions

The instructions below correspond with the application.

1. Fees

If you are an ATSSA member, the fee is \$109.00. The fee for nonmembers is \$130.00. ATSSA staff will confirm member status. This fee may have already been paid when you registered for the course(s).

2. Payment Method

Payment may be made by check, money order or designated credit cards. DO NOT SEND CASH.

3. Employment Data

Your name should be printed exactly the way you want it to appear on your certificate and card. The address should be your company's main/central office. Your certification package will be mailed there unless otherwise noted. Please do not use a field office address.

4. Relevant Work Experience

Explain in detail your 1,000 hour relevant work experience in a foreman or supervisor capacity.

5. (and 6.) Professional References

Professional references are necessary to verify your experience. To expedite the process and avoid delays, it is imperative that you complete all of the information shown for each reference. In addition, ensure that the following criteria are met:

- Reference 1 should be your immediate supervisor. If your present supervisor cannot verify that you have at least one year (2,000) hours of guardrail installation experience, another reference must be provided (a previous employer).
- Reference 2 cannot be employed by your present employer. If you are public official, Reference 2 cannot be employed in the same division of your agency.

- If you are self-employed, you will need to furnish an outside professional reference to verify your experience.
- References from family members will not be considered.

7. Statement of Experience and Code of Ethics

The statement of experience and the Code of Ethics are integral parts of this application. Your signature and date on the bottom of the application indicate that the information you have provided is accurate and true, and that you agree to abide by the Code of Ethics. CERTIFICATION WILL NOT BE ISSUED WITHOUT YOUR SIGNATURE.

Final Steps

To ensure your application is complete and ready for processing, please review the following checklist:

- Has the application been double-checked and all required information is completed?
- Has the application been signed and dated?
- Has payment been included?

Mail the completed form and processing fee to:

American Traffic Safety Services Association (ATSSA)
15 Riverside Parkway, Suite 100
Fredericksburg, VA 22406-1022
540-368-1701
877-642-4637 (toll free)
540-368-1722 (fax)*

*Applications may be faxed; however, you are still required to mail the original signed document.



SAFER ROADS SAVE LIVES

Guardrail Installer Certification Application

Top portion to be completed by ATSSA staff:

Exam Date	GIT Grade	Expiration Date	ID #
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1. Fees ___ \$109 ATSSA Member ___ \$130 Nonmember

2. Method of Payment ___ Check/Money Order ___ MasterCard ___ Visa ___ AMEX
Card Number: _____ Expiration: _____ CVV: _____
Cardholder's Name/Signature: _____

3. Employment Data
Name: _____
Title: _____
Company/Agency: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

4. Relevant Work Experience

5. Professional Reference 1
Immediate Supervisor: _____
Title: _____
Company/Agency: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

6. Professional Reference 2
Name: _____
Title: _____
Company/Agency: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

7. Statement of Experience and Code of Ethics
By signing this application, I confirm that I have at least one year (2,000) hours of guardrail installation experience. I certify that the information provided herein is true and correct, to the best of my knowledge. Finally, I attest that I have read and understand the accompanying Code of Ethics and, once certified, agree to perform my professional duties and to conduct myself accordingly.

Signature: _____ Date: _____



Code of Ethics

As a Certified Guardrail Installer, I pledge and affirm to subscribe to the following articles of the Code of Ethics:

1. To conduct myself in a professional manner on the job in such a way as not to bring discredit to myself, my superiors, or others in my profession.
2. To perform my duties in a manner which provides the maximum level of safety to the motoring public, the pedestrian, the workers, and myself.
3. To strive to maintain a continuing education and personal skills enhancement program that will keep me up-to-date with the latest provisions of the Manual on Uniform Traffic Control Devices (MUTCD), and applicable state and local standards and guidelines.
4. To perform my duties in accordance with the latest provisions of the MUTCD for Streets and Highways and other applicable specifications and standards.
5. To assure that all devices and application of devices used on jobs where I am the designated Guardrail Installer are in accordance with the provisions of the MUTCD or other applicable specifications and standards, and to report to the appropriate authority any deviations from said standards.
6. To be courteous to and accommodating of the general public.
7. To the best of my ability, provide assistance to those who may have met with misfortune at the worksite, according to the governing Good Samaritan laws.
8. When in the role of personnel supervisor, to conduct myself in a manner that will command respect for me and for the profession.
9. To promote the growth and image of the Certified Guardrail Installer program in order to receive the maximum level of acceptance and respect of the general public and the highway construction industry, as well as my fellow workers in the industry.
10. To support the profession of Guardrail Installer by offering guidance to those desiring to enter the industry, and by sharing information with them that will promote improved safety measures for the traveling public and the highway worker.
11. To maintain the highest ethical and moral standards in this important position of public trust in highway safety.



Checklist

Product & System Types

Name: _____
Company: _____
Date: _____

After each selection, list the specific systems and variations in use in your area.

Semi-Rigid Barrier Systems

- W-Beam _____
- 31" W-Beam _____
- Thrie-Beam _____
- Modified Thrie-Beam _____
- Box Beam _____
- Aesthetic Timber Barriers _____
- Other (Specify System) _____

Flexible Barrier Systems

- Low-Tension Cable Barrier _____
- High-Tension Cable Barrier _____
- Weak Post W-Beam _____
- Other (Specify System) _____

Permanent Rigid Barrier Systems

- Concrete Safety-Shape NJ Barrier _____
- Concrete F-Shape Barrier _____
- Concrete Vertical Barrier _____
- Concrete Constant Slope Barrier _____
- Aesthetic Design Textured Concrete Barrier _____
- Bridge Rail (Specify System, Test Level, & Material) _____
- Other (Specify System) _____

Work Zone Barriers

- Concrete Barrier _____
- Steel Barrier _____
- Plastic Water Filled Barrier _____
- Movable Barrier _____
- Other (Specify System) _____

Emergency Access Gate Systems

- (Specify System) _____

Transitions

- W-Beam or Thrie Beam to Rigid Barrier (Specify System & Test Level) _____
- Cable to W-Beam (Specify System) _____
- Box Beam to Rigid Barrier (Specify System & Test Level) _____
- Other (Specify System & Test Level) _____

W-Beam Terminals

- Tangent _____
- Flared _____
- Median _____
- Generic _____
- Other (Specify System) _____

Other Terminals

- Box Beam Terminals _____
- Low-Tension 3 Cable Barrier Terminals _____
- High-Tension 3 Cable Barrier Terminals _____
- High-Tension 4 Cable Barrier Terminals _____
- Other (Specify System) _____

Crash Cushions (Re-directive)

- (Specify Systems, Manufacturer, & Test Level) _____

Crash Cushions (Non Re-directive)

- (Specify Systems, Manufacturer, & Test Level) _____

Crash Cushions (Specific Applications)

- (Specify Systems, Manufacturer, & Test Level) _____

Truck Mounted Attenuator (Truck Mounted and/or Trailer)

- (Specify Systems, Manufacturer, & Test Level) _____

STUDENT:

I attest that all the information stated on this application form is accurate.

Name: _____ Date: _____

Signature: _____

SUPERVISOR:

I affirm that all information stated on this application form is accurate.

Name: _____ Date: _____

Signature: _____