



# APPLICATION FORM

Council-certified Residential  
Microbial Remediator

# CRMR

## INSTRUCTIONS:

Candidates for the CRMR must complete **three tasks** in order to become certified by the American Council for Accredited Certification:

- 1) Submit an eligible application (typed or neatly printed).
- 2) Pass the CRMR examination with a score of 75% or better
- 3) Await board review of the completed application

### Task #1: The application packet

This booklet contains all the information and forms necessary for the first task: completion of the application packet. In order to apply, please take the following steps:

1. \_\_\_\_\_ Determine your eligibility by reading the program description ([www.acac.org/forms/applications/crmrdescription.pdf](http://www.acac.org/forms/applications/crmrdescription.pdf))
2. \_\_\_\_\_ Complete, sign and notarize this application form.
3. \_\_\_\_\_ Attach the application fee (credit card payments are also accepted in the Council office via phone or fax).

### Task #2: The CRMR examination

Once your completed application (including payment) is on file with the Council office, you may register for the CRMR exam by calling (888) 808-8381. The Council staff will assist you in selecting a testing center near you. For an updated list of exam topics and item references to use in test preparation, visit [www.acac.org](http://www.acac.org).

### Task #3: Board review

Following a successful examination, the Council staff forwards the complete, eligible application to the CRMR certification board. You will be notified within approximately two weeks after the board reviews your application.

### Filling out the application form

You can fill this application form out on your computer, then print or scan a copy for your records (you cannot save data typed into this form unless you have a PDF authoring application such as Adobe Acrobat). If you have trouble typing into the form, make sure your PDF reader is set to view document in PDF mode, rather than PDF/A mode. In Adobe Reader, go to Edit > Preferences > Documents and set the PDF/A View Mode to "Never."

**NOTE: IT IS THE CANDIDATE'S RESPONSIBILITY TO ENSURE THAT HIS OR HER APPLICATION IS COMPLETE AND ELIGIBLE.** Incomplete files will not be forwarded to the board for review.



**OFFICIAL APPLICATION**  
**Council-certified Residential**  
**Microbial Remediator**

**CRMR**

(Office Use Only)	
Received by: _____	Date: _____

Please FAX notarized application to **(888) 894-3590** or email an electronic copy to [info@acac.org](mailto:info@acac.org). Checks may be mailed to PO Box 1000 Yarnell, AZ 85362.

**CONTACT INFORMATION**

**Full Name:** \_\_\_\_\_  
**Professional Title:** \_\_\_\_\_  
**Company Name:** \_\_\_\_\_  
**Business Address:** \_\_\_\_\_  
**Cit/State/ZIP Code:** \_\_\_\_\_  
**Business Phone:** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_  
**FAX Number:** \_\_\_\_\_  
**Last 4 Digits of SSN:** \_\_\_\_\_  
**Home Address:** \_\_\_\_\_  
**City/State/ZIP:** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_  
**Mobile Phone:** \_\_\_\_\_

**Licenses and Designations Held:**

\_\_\_\_\_  
 \_\_\_\_\_

**CRMR COURSE INFORMATION**

**Course Dates (if any):**

\_\_\_\_\_  
**Course Provider Name:**  
 \_\_\_\_\_

**AFFIDAVIT:** By signing this application, I make the following statements:

- I am legal to work in the USA and currently employed in the field of microbial remediation.
- I am aware of and abide by all local, state and Federal regulations governing asbestos, lead and other hazardous materials.
- I agree to comply with the ACAC code of conduct and pledge myself to the highest ethical standards.
- I agree to restrict my use of the CRMR to the activities for which certification has been granted and to abide by the limitations of the designation.
- I agree to refrain from using the CRMR in such a manner as to bring the ACAC into disrepute.
- I agree to refrain from making any statements regarding the CRMR which the ACAC may consider misleading or unauthorized.
- I agree to refrain from using the CRMR in a misleading manner.
- I understand that the CRMR certificate remains the property of the ACAC.
- I agree to discontinue the use of all claims to the certification in the event that it is suspended or withdrawn and to return the CRMR certificate to the ACAC.
- I understand that the application fee is non-refundable.
- I understand that dropping the word "residential" from the designation title or the letter "R" from its acronym is grounds for immediate revocation of this designation.
- I agree to indemnify and hold harmless the ACAC and all its agents and employees from and against any liability whatsoever in connection with this application, the CRMR examination and/or the granting of or failure to grant certification.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Notary Public:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**Notary Seal/Stamp:** \_\_\_\_\_ **Date:** \_\_\_\_\_