# APPENDIX 4: Template for Presentation of Experience

Please read the section on Work Experience Details in the Membership Guidelines before completing this template.

All applicants for Society membership must provide work experience details for review and assessment by the Society using the Template for Presentation of Experience. Because the decision regarding an applicant’s eligibility is primarily based on the information contained in the applicant's work experience details submitted in support of his or her application, applicants are encouraged to provide as much relevant information as possible. While an effort will be made to request additional information from the applicant if required, this is not always possible without jeopardizing application deadlines. It is the applicant's responsibility to ensure that sufficient information is provided prior to any application deadline. One hard copy and one electronic copy of the entire submission are required.

The Template for Presentation of Experience includes the following components:

**Curriculum Vitae**

* Must be completed according to the template

**Position Descriptions**

* You must complete one form for each position for which you are seeking credit.
* If your role or level of responsibility changed significantly under any one position, you must break the position into multiple positions and complete one form for each position created.
* Since the CSAP designation is an individual designation, applicants should use the first person singular to specifically describe their own work experience, role and responsibilities. While applicants may provide a description of the team’s role, which will include components for which the applicant was not directly responsible, providing the team role only is not sufficient.
* Remember to relate each position description to the requirements of both RDE and DDE including but not limited to:
  + How your work involved the application of scientific, engineering or geoscience principles related to contaminated site assessment, management and remediation;
  + How you were personally responsible for the evaluation and selection of scientific or technical methodologies for conducting contaminated site assessment, management and remediation, including a description of the types of methodologies selected and the basis for selection;
  + The types and levels of responsibilities of persons you coordinated or supervised and what authority you assumed over their work;
  + The level of responsibility and independent judgment you exercised in this position including the types and categories of conclusions you reached and the extent to which these conclusions were used in reports and in making recommendations to employers or clients; and
  + Information regarding applications for legal instruments to which you contributed.

**Project Descriptions**

* You must provide a minimum of three detailed project descriptions for each position claimed (total of 9 projects min.).
* Selected projects should be representative of the position.
* In aggregate, your project descriptions must cover all stages of assessment and remediation and, for Risk Assessment Specialist applicants, both human health and ecological risk assessment.
* Remember to relate each project description to the requirements of both RDE and DDE including, but not limited to:
  + How you applied your technical knowledge and skill related to contaminated sites assessment, management and remediation;
  + The types and levels of responsibilities of persons you coordinated or supervised and what authority you assumed over their work;
  + The nature and extent of environmental conditions at the site;
  + The contaminants looked for and encountered;
  + Methodologies selected and why they were selected;
  + The extent to which you were a principle decision-maker for this project; and
  + Your overall role in the project including a description of your conclusions and recommendations and to whom and how these were communicated.
* Project Supervisor must sign the relevant section to acknowledge that they are substantiating the experience information provided.

If you have worked on multiple projects while in a Position, a table is provided to list and total the accrued amounts of RDE, DDE, and DDE DM for the individual projects (format may also be used in MS Excel).

**Summary of Experience Gained in Preparing CSAP Submissions Application Packages**

* You must provide information regarding a minimum of three submissions where you have been substantially involved (senior review DDE level) in the preparation of the instrument application packages for AP review and CSAP submission. The applicant’s involvement in the application must be representative of the same type as the Approved Professional designation (numerical standards or risk-based standards) for which you are applying.
* Application material must have been submitted to CSAP in accordance with Protocol 6, and subsequently assigned a BC ENV Site ID.

**Project Experience Hours Summary Table**

* + - You will transfer information from your **Position and Project Descriptions** to the Project Experience **Summary Table**.

**Optional Statement of Qualifications**

All applicants are invited to include an **Optional Statement of Qualifications** with their work experience details. This statement provides an opportunity for the applicant to write no more than 250 words in support of his or her application emphasizing why the applicant feels that he or she is qualified for Society membership.

**CSAP MEMBERSHIP GUIDELINES**

**Curriculum Vitae Template**

**Applicant Contact Information**

|  |  |  |
| --- | --- | --- |
| Full Legal Name | | |
| Mailing Address |  | |
|  | |
| Daytime Tel (1) | | Daytime Tel (2) |
| E-Mail Address | | Daytime Fax |
| Bachelor’s Degree | | Graduation Date (Month/Year) |
| Master’s Degree | | Graduation Date (Month/Year) |
| Doctorate Degree | | Graduation Date (Month/Year) |
| Registration with: EGBC, BCIA, CAB, or ACPBC *(Please Tick)* | | |
| Discipline | | Registration Date (Month/Year) |
| Discipline | | Registration Date (Month/Year) |

## CSAP MEMBERSHIP GUIDELINES

**Applicant Name:**

## Employment History

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Start Date**  (Month, Year) | **End Date (**Month, Year) | **Employer \* (**Name and Address) | **Job Title** | **Job Outline**  (Roles and Responsibilities) | **% Full Time \*\***  (Cont. Site Work) |
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\*Employer column also refers to self-employment, contract work, volunteer / service activities, and contributions to industry / academic publications.

\*\*Where employment was not full-time in contaminated sites, please include an estimation of what portion of work was in contaminated sites.

## Presentation of Experience

|  |  |
| --- | --- |
| **Applicant**  **Name** |  |
| **Application**  **Type** | Numerical Standards Approved Professional |
| Risk-based Standards Approved Professional |

**POSITIONS DURING WHICH EXPERIENCE WAS GAINED** *(Please list relevant positions/project needed to accumulate the required number of hours to qualify for the stated years of experience)*

### Section 1: Credit for post graduate research

Please refer to Membership Guidance (page 4) if you are seeking credit for post-graduate research.

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| --- | --- | --- | --- | --- | --- | --- |
| **Relevant or Direct Documented Experience (RDE or DDE): Post Graduate Degree Research (maximum 1 year)** | | | | | | |
| ***Post-Graduate Degree*** | ***Research Component*** | | | | | **RDE**  **1 year** |
| **Degree Type** |  | | | | |  |
|  | | | | | |
| ***Post-Graduate Research* Period** | **Start Date: End Date:** | | | | | **REVIEWER’S COMMENTS:**  **Note: years claimed for post Graduate research cannot exceed 1 year** |
| **Research Title** |  | | | | |
| **Research Description** |  | | | | |
| **Relevant Activities Carried Out** |  | | | | |
| **Research Supervisor  verifying**  **the Project Details** | **Name: Phone No.**  **Signature:** | | | | |
| **Experience Accrued** | **RDE hours** |  | **Research RDE Years = RDE Hours /1,250** |  | | **Rationale for RDE:** |
|  | **DDE hours** |  | **Research DDE Years = DDE Hours /1,000** |  | | **Rationale for DDE:** |
|  | | | | |

**Applicant Name**

**Section 2: Direct Documented Experience, Direct Documented Decision-Making level, and Relevant Documented Experience**

1. Please include sufficient positions and projects to document a minimum of 8,000 hours of Direct Documented Experience (DDE), of which 4,000 hours are at a Decision-Making level. You will require multiple copies of the template below.
2. If you are applying for a second designation, you must demonstrate that you satisfy the DDE and decision-making level DDE requirements of the second designation. For example, a Numerical Standards AP seeking the Risk-based Standards AP designation must document 8,000 hours of risk assessment experience with 4,000 hours at the decision-making level. Conversely, a Risk-based Standards AP seeking the Numerical Standards AP designation must document 8,000 hours of site assessment and remediation experience with 4,000 hours at the decision-making level.
3. If you are claiming relevant non-contaminated sites experience, please consult Appendix 3 for an explanation and examples of the category.
4. PROJECTS DURING WHICH EXPERIENCE IS CLAIMED

If the time spent on the project directly related to CS work was > 50% of the total hours that can be claimed during the time period then the full hours can be claimed, if < than 50% of your time was spent on directly related CS work the hours must be prorated.

**Example**: Project duration over several years = 400 hours, of which candidate spent 200 hours on non-decision-making level DDE work and 200 hours on decision-making activities. Therefore, CS DDE = 400/1000 = 0.4yrs, of which

CS DDE Decision Making = 200/1000 = 0.2 yrs.

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| **Contaminated Sites Direct Documented Experience (DDE)**  **Contaminated Sites Direct Documented Decision-Making level (DDE DM)**  **Non-contaminated Sites Relevant Documented Experience (RDE), see Appendix 3** | | | | | | | | | | | | |
| **SUMMARY POSITION #** | | | | | | |  | |  | | | |
| **Your Position**  **Title** |  | | | | | | | | | | | |
| **Employer** |  | | | | | | | | | | | |
| **Supervisor’s**  **Name** |  | | | | | | | **Supervisor’s Phone No.** | | |  | |
| **Start Date** |  | | | **End Date** |  | | | **No. of Months at Position** | | |  | |
| **Position Description** |  | | | | | | | | | | | |
| **Experience Claimed during the position** | | **Hours RDE** |  | **Hours DDE** | | |  | | **Hours DDE** Decision Making Level | |  | |
| **Experience in years** | | RDE Years = Hours RDE /1,250 |  | DDE Years = Hours DDE /1,000 | | |  | | DDE DM Years =  Hours DDE DM /1,000 | |  | |

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| **Contaminated Sites Direct Documented Experience**  **Contaminated Sites Direct Documented Decision making level**  **Non-contaminated Sites Relevant Documented experience, see Appendix 3** | | | | | | | | | | | |
| **SUMMARY of POSITION #** | | | | | | | | | | | |
| **Your Position Title** |  | | | | | | | | | | | |
| **Employer** |  | | | | | | | | | | | |
| **Supervisor’s Name** |  | | | | | | **Supervisor’s Phone No.** | |  | | | |
| **Start Date** |  | | **End Date** | |  | | | **No. of Months at Position** | | |  | |
| **Position Description** |  | | | | | | | | | | | |
| **Experience Claimed during the position** | **Hours RDE** |  | | **Hours DDE** | |  | | **Hours DDE** Decision Making Level | |  | | |
| **Experience in years** | RDE Years = Hours RDE /1,250 |  | | DDE Years = Hours DDE /1,000 | |  | | DDE DM Years = Hours DDE DM /1,000 | |  | | |

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| **Contaminated Sites Direct Documented Experience**  **Contaminated Sites Direct Documented Decision making level**  **Non-contaminated Sites Relevant Documented experience, see Appendix 3** | | | | | | | | | | | |
| **SUMMARY of POSITION #** | | | | | | | | | | | |
| **Your Position Title** |  | | | | | | | | | | | |
| **Employer** |  | | | | | | | | | | | |
| **Supervisor’s Name** |  | | | | | | **Supervisor’s Phone No.** | |  | | | |
| **Start Date** |  | | **End Date** | |  | | | **No. of Months at Position** | | |  | |
| **Position Description** |  | | | | | | | | | | | |
| **Experience Claimed during the position** | **Hours RDE** |  | | **Hours DDE** | |  | | **Hours DDE** Decision Making Level | |  | | |
| **Experience in years** | RDE Years = Hours RDE /1,250 |  | | DDE Years = Hours DDE /1,000 | |  | | DDE DM Years = Hours DDE DM /1,000 | |  | | |

**\* copy this table if additional Positions required**

**Applicant Name**

You must provide a minimum of **THREE** project descriptions for **EACH** position claimed (**total of 9** projects minimum).

Relate each **project description** to the requirements of both **RDE** and **DDE** as appropriate

**Detailed description of the experience gained during the position by project:**

**Copy this table if additional Projects / Positions required**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **POSITION #** | |  | | | | **PROJECT # 1** | | |  | | |
| **Project Period** | **Start Date:** | | | | | **End Date:** | | | | | **REVIEWER’S COMMENTS** |
| **Total no. of hours spent on Project:** | | | | |  | | | | |  |
| **Project Name** |  | | | | | | | | | |  |
| **Project Description** |  | | | | | | | | | |  |
| **Relevant Activities Carried Out** |  | | | | | | | | | |  |
| **Project Supervisor  Verifying the Project Details** | **Name:** | |  | | **Phone No.** | | |  | | |  |
| **Signature:** | |  | | | | | | | |  |
| **Experience Accrued on Project** | **Hours RDE** | |  | **Hours DDE** | | |  | | | **Hours DDE** - Decision Making Level |  |
| **Experience in years** | RDE Years = Hours RDE /1,250 | |  | DDE Years = Hours DDE /1,000 | | |  | | | DDE DM Years = Hours DDE DM /1,000 |  |
|  |  | | **Total Hours** |  | | | **Total Years** | | |  |  |

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| **POSITION #** | |  | | | | | **PROJECT # 2** | | |  | | |
| **Project Period** | **Start Date:** | | | | | | **End Date:** | | | | | **REVIEWER’S COMMENTS** |
| **Total no. of hours spent on Project:** | | | | | |  | | | | |
| **Project Name** |  | | | | | | | | | | |
| **Project Description** |  | | | | | | | | | | |
| **Relevant Activities Carried Out** |  | | | | | | | | | | |
| **Project Supervisor  Verifying the Project Details** | **Name:** | |  | | | **Phone No.** | | |  | | |
| **Signature:** | |  | | | | | | | | |
| **Experience Accrued on Project** | **Hours RDE** | | |  | **Hours DDE** | | |  | | | **Hours DDE** - Decision Making Level |  |
| **Experience in years** | RDE Years = Hours RDE /1,250 | | |  | DDE Years = Hours DDE /1,000 | | |  | | | DDE DM Years = Hours DDE DM /1,000 |  |
|  |  | | | **Total Hours** |  | | | **Total Years** | | |  |  |

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| **POSITION #** | |  | | | | | **PROJECT # 3** | | |  | | |
| **Project Period** | **Start Date:** | | | | | | **End Date:** | | | | | **REVIEWER’S COMMENTS** |
| **Total no. of hours spent on Project:** | | | | | |  | | | | |
| **Project Name** |  | | | | | | | | | | |
| **Project Description** |  | | | | | | | | | | |
| **Relevant Activities Carried Out** |  | | | | | | | | | | |
| **Project Supervisor  Verifying the Project Details** | **Name:** | |  | | | **Phone No.** | | |  | | |
| **Signature:** | |  | | | | | | | | |
| **Experience Accrued During this Project** | **Hours RDE** | | |  | **Hours DDE** | | |  | | | **Hours DDE** - Decision Making Level |  |
| **Experience in years** | RDE Years = Hours RDE /1,250 | | |  | DDE Years = Hours DDE /1,000 | | |  | | | DDE-DM Hours accumulated /1,000 = yr |  |
|  |  | | | **Total Hours** |  | | | **Total Years** | | |  |  |

**\* copy this table for additional Projects / Positions as required**

**You must provide a minimum of three Project descriptions for each Position claimed.**

### SECTION 3: Summary of Experience Gained in Preparing CSAP Instrument Application Packages

*Experience claimed for the substantial involvement (senior review DDE level) in the preparation of a minimum of three instrument application packages for AP review and CSAP submission. Application material must have been submitted to CSAP in accordance with Protocol 6, and subsequently satisfactorily released by BC ENV.*

*Please provide relevant Position number and Project number if details for these are provided above*

|  |  |  |  |
| --- | --- | --- | --- |
| **Instrument Submission Experience** | | | |
| **Submission 1 –** | | | Description of Role and Responsibilities in Preparation of Instrument Package: |
| BC ENV Site ID: |  | Instrument Type:  CoC  CoC - Risk  Determination  AiP  CSRA |  |
| Position # |  |
| Project # |  | **Submitting AP:** |  |
| **AP Signature:** |  |
| **Submission 2 –** | | | Role and Responsibilities: |
| BC ENV Site ID: |  | Instrument Type: CoC  CoC - Risk  Determination  AiP  CSRA |  |
| Position # |  |
| Project # |  | **Submitting AP:** |  |
| **AP Signature:** |  |
| **Submission 3 –** | | | Role and Responsibilities: |
| BC ENV Site ID: |  | Instrument Type  CoC  CoC - Risk  Determination  AiP  CSRA |  |
| Position # |  |
| Project # |  | **Submitting AP:** |  |
| **AP Signature:** |  |

**Experience Summary**

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant Name** |  | |  |
| **Application Type** |  | Numerical Standards Approved Professional |
|  | Risk-based Standards Approved Professional |
| **Applicant Graduation Date** | **(Bachelor)**  **(Other)** | |

**SECTION 4: Project Experience Hours Summary Table**

This is a summary of positions during which the at least ten years of experience were gained.

The Excel template provided (or Table on the following page) must be used to tabulate and total the experience hours accrued over multiple projects. Change the Years indicated or add Projects as necessary.

*(the experience claimed for each position must total the minimum experience required in each category, please add additional positions as required)*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Number** | **Position #:** |  |  | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | | **Totals** | | | |
| **Year:** | **CSAP Submission Experience? Y/N** |  | | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |  | | | | | |
| **Project Name\*** | **RDE** | | **DDE** | | **DM DDE** | | **RDE** | | **DDE** | | **DM DDE** | | **RDE** | | **DDE** | | **DM DDE** | | **RDE** | | **DDE** | | **DM DDE** | | **RDE** | | **DDE** | | **DM DDE** | | **RDE** | | **DDE** | | **DM DDE** | | **RDE** | | **DDE** | | **DM DDE** | | **RDE** | | **DDE** | **DM DDE** |
| **1** |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| **2** |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| **3** |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| **4** |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| **5** |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| **6** |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| **7** |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| **8** |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| **9** |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| 10 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| 11 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| 12 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| 13 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| 14 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
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| 17 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| 18 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| 19 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| 20 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| 21 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| 22 |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
|  |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| Total Hours | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |  |
| Total Years | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |  |

\*Note: For Project Name, please use brief descriptor of project type and location.

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| --- |
| 1 |

Minimum of NINE projects must be presented.

|  |
| --- |
| 10 |

Project and Position Number must correspond to Project on Presentation of Experience CSAP Form

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| **Project Number** | **Position #:** |  | | |  | | |  | | | **Totals** | | | **Total Position #1** | | | **Total Position #2** | | | **Total Position #3** | | |
| **Year:** |  | | |  | | |  | | |
| **Project Name\*** | **RDE** | **DDE** | **DM DDE** | **RDE** | **DDE** | **DM DDE** | **RDE** | **DDE** | **DM DDE** | **RDE** | **DDE** | **DM DDE** | **RDE** | **DDE** | **DM DDE** | **RDE** | **DDE** | **DM DDE** | **RDE** | **DDE** | **DM DDE** |
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| Total Hours | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Total Years | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **FINAL SUMMARY** |  | **# Years** | **Reviewer Comment/ Hours Missing** |
| **RELEVANT CONTAMINATED SITES EXPERIENCE** | (Not to exceed 2 yrs) |  |  |
| **CONTAMINATED SITES DIRECT DOCUMENTED EXPERIENCE** | (Minimum 8 yrs) |  |  |
| **TOTAL** | (Minimum 10 yrs) |  |  |
|  |  |  |  |
| **CONTAMINATED SITES DIRECT DOCUMENTED EXPERIENCE - DECISION MAKING** | (Minimum 4 yrs of the  8 DDE yrs) |  |  |

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| **CSAP SOCIETY REVIEWER’S RECOMMENDATION** |
| I recommend that the applicant be permitted to sit the Approved Professionals Examination and, if successful, be appointed to the Roster (minimum 10 years of eligible experience). |
| I recommend that the applicant only be permitted to sit the Approved Professionals Examination at this time (minimum 9 years of eligible experience). |
| The applicant does not yet qualify to sit the Approved Professionals Examination or be appointed to the Roster. |
| **COMMENTS** (Please include any comments below. If large portions of experience or projects were discredited, please include these here. If you recommend the CSAP Board invite the candidate to an experience review interview, please include your reasons here.) |
| **Reviewers Name: Signature: Date: / /** |

**Optional Statement of Qualifications**

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| **Applicant Name** |  |  |
| **Application Type** | Numerical Standards | Risk-based Standards |
|  | Approved Professional | Approved Professional |

This statement provides an opportunity for the applicant to write no more than 250 words in support of his or her application emphasizing why the applicant feels that he or she is qualified for Society membership.

**Sample Project Description:**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **POSITION #** | | **1** | | | | **PROJECT # 1** | |  | | | |
| **Project Period** | **Start Date: January 2015** | | | | | **End Date: December 2017** | | | | | **REVIEWER’S COMMENTS** |
| **Total no. of hours spent on Project:** | | | | | **383.75** | | | | |  |
| **Project Name** | Stage 1 PSI, DSI and COR for Bulk Plant, Langley, BC | | | | | | | | | |  |
| **Project Description** | The project involved a site which was operated as a bulk plant. Previously, other consultants had completed some investigation and identified petroleum hydrocarbon related contamination in soil and groundwater as well as phenols in soil and had decommissioned the bulk plant facility. The main objectives of the program were to delineate and remediate contamination, and obtain a Certificate of Compliance for the site. A Certificate of Compliance was required to support the eventual sale of the site. I conducted the Stage 1 PSI and post remedial investigation field work under guidance from a senior project manager. The Stage 1 PSI,DSI,COR report was part of a successful submission to the BC ENV for a Certificate of Compliance for CL use for the site and adjoining City of Langley lands. | | | | | | | | | |  |
| **Relevant Activities Carried Out** | Relevant Numerical Standards Assessment activities that I carried out:  -co-wrote the Stage 1 PSI report with technical conclusions which was reviewed by a Roster Professional Expert  -conducted drilling field work for post remedial investigation  -conducted groundwater monitoring and sampling field work for post remedial investigation  -co-wrote DSI and COR report with technical conclusions which was reviewed by a Roster Professional Expert  -conducted field work for monitoring well decommissioning under the supervision of a qualified Professional Engineer | | | | | | | | | |  |
| **Project Supervisor  Verifying the Project Details** | **Name:** | | **Joe Peng** | | **Phone No.** | | **604 555-1234** | | | |  |
| **Signature:** | |  | | | | | | | |  |
| **Experience Accrued on Project** | **Hours RDE** | |  | **Hours DDE** | | | | | 333 | **Hours DDE** - Decision Making Level | 50 |
| **Experience in years** | RDE Years = Hours RDE /1,250 | |  | DDE Years = Hours DDE /1,000 | | | | | 0.333 | DDE DM Years = Hours accumulated /1,000 = yr | 0.05 |
|  |  | | **Total Hours** | 383.75 | | | | | **Total Years** | 0.383 |  |