



## AMERICAN INDOOR AIR QUALITY COUNCIL

### School-based IAQ Mentoring Program

In order to recognize its certificants involved in community service activities, the American IAQ Council will offer up to 12 re-certification credits (RCs) per year to any Council-certified professional who assists a public or private school in implementing or maintaining an IAQ program such as EPA's *IAQ Tools for Schools*.

#### **Qualifying activities include:**

- Implementing a new IAQ program at a public or private school
- "Mentoring" an existing IAQ program
  - Providing expertise on IAQ issues
  - Conducting training for school personnel
- Providing professional services under the IAQ program, either as a school employee or as an unpaid volunteer
  - IAQ management services
  - IAQ consulting services
  - IAQ remediation services

#### **Conditions:**

- Certificants must be school employees or work on a volunteer basis.
- Certificant involvement in the IAQ program may not include the marketing of goods or services to the school.
- Certificants must document their involvement by submitting a form signed by school administration which attests to their participation in the IAQ program (see next page).

#### **Credits:**

- The IAQ Council will grant one RC per month of documented involvement in the IAQ program.
- RCs may be applied to any IAQ Council certification.



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## Affidavit of Participation

I understand that \_\_\_\_\_ (the CERTIFICANT) is applying to the American Indoor Air Quality Council for re-certification credits (RCs) as a Council-certified professional.

I understand that the American IAQ Council grants up to 12 RCs per year to Council-certified professionals who assists a public or private school in implementing or maintaining an IAQ program such as EPA's *Tools for Schools* (TfS).

By signing this form, I make the following statements:

- The Certificant is either a school employee or an unpaid volunteer.
- The Certificant's involvement in the IAQ program did not include the marketing of goods or services.
- The Certificant participated directly in the implementation or maintenance of an IAQ program at the following school or school district:

School/District Name: \_\_\_\_\_

Address: \_\_\_\_\_

Dates of Candidate's Involvement (mm/yy): \_\_\_\_\_ to \_\_\_\_\_

Number of months Candidate was involved in the school's IAQ program: \_\_\_\_\_

I understand the American Indoor Air Quality Council will hold this information confidentially.

\_\_\_\_\_  
Signature (may be subject to verification)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Please print or type)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone

\_\_\_\_\_  
email