

# Trainer Participation Application

## Performance Tested Comfort Systems

All sections of this form are required for anyone interested in proving trainings of PTCS® Heat Pump installations and/or PTCS Duct Sealing for Bonneville Power Administration (BPA). Companies may propose multiple trainers, but a separate form is required for each individual. A minimum of 2 years documented experience with PTCS is required.

**Minimum Trainer Qualifications** – Trainers shall meet all requirements for technician certification and meet the following minimum standards:

**PTCS Heat Pump Commissioning Trainers** shall have a minimum two (2) years verifiable full time experience installing or inspecting the following: testing heat pump auxiliary heat controls, indoor coil airflow, sizing and refrigerant charge. Applicants' projects will be reviewed and possibly inspected for accuracy and pass rate.

**PTCS Duct Sealing Trainers** shall have a minimum two (2) years verifiable full time experience installing or inspecting the following: duct system testing, diagnostics, repair, and sealing in site built and manufactured homes. Applicant's projects will be reviewed and possibly inspected for accuracy and pass rate.

- 1) Submit this completed form to BPA for consideration by email to [ResHVAC@bpa.gov](mailto:ResHVAC@bpa.gov) or by fax to 1-877-848-4074.
- 2) Provisionally approved applicants (granted after application is submitted showing all participation requirements met) will go through an orientation process to include receiving access to training materials, and having a training be observed, evaluated, or coached to monitor for teaching effectiveness. Once orientation process is successfully completed, full trainer approval is granted.

### Contact Information

Company Name	Trainer Name
Company Address	City/State/Zip
Phone	Email
If approved, does this trainer prefer to be listed online as an Approved Trainer on <a href="http://bpa.gov/energy-and-services/efficiency/residential/hvac">bpa.gov/energy-and-services/efficiency/residential/hvac</a> ? <span style="float: right;"> <input type="checkbox"/> Yes   <input type="checkbox"/> No         </span>	

Which do you want to be certified to teach?	PTCS Duct Sealing	PTCS Heat Pumps
Who do you intend to train?	People in my organization	People outside my organization

### Trainer Experience

*A minimum of 2 years documented experience with PTCS is required.*

<b>PTCS Duct Sealing Trainers</b>	Years of verifiable duct sealing & testing experience: _____ Duct sealing and leakage testing experience includes:  Company or companies worked for:
<b>PTCS Heat Pump Trainers</b>	Years of verifiable heat pump installation & commissioning experience: _____ Heat pump installation & commissioning experience includes:  Company or companies worked for:



## Training Experience

Please provide information on your training or teaching experience below.

## References

Please provide name and contact information for your references

Name	Association	Phone Number

## Trainer and Company Requirements Applicant and Company Must Agree to:

1. Trainer agrees to complete orientation and comply with all Training Requirements as listed on [bpa.gov/energy-and-services/efficiency/residential/hvac](http://bpa.gov/energy-and-services/efficiency/residential/hvac).
2. Trainer must provide dated proof of certification if the students pass the class and demonstrate mastery.
3. Trainer will confirm training completion status for students to BPA and/or BPA's utilities upon request.
4. BPA reserves the right to refuse to list a trainer for any reason.
5. Company must notify BPA immediately if they no longer offer training through a BPA-approved trainer.
6. Trainer shall use only BPA-provided or BPA-approved PTCS training materials for PTCS trainings.

*(See Participation Requirements listed on [bpa.gov/energy-and-services/efficiency/residential/hvac](http://bpa.gov/energy-and-services/efficiency/residential/hvac))*

## Signatures

**By signing below**, the Applicant agrees to comply with Trainer and Company Requirements and certifies that all information provided in this application is true and correct to the best of their knowledge.

Applicant Signature	Observer Signature	Date
<b>For Internal Use</b> Applicant has attended PTCS Trainer Orientation Applicant has completed a supervised training	Observer Signature	Date

