

## MCERTS Manual Stack Emission Monitoring Personnel Certification Scheme Application for Registration for Trainees

MCERTS Registration No:

*Please read Notes overleaf before completing*

Forename(s): \_\_\_\_\_ Surname: \_\_\_\_\_

Name as you would like it to appear on ID card: \_\_\_\_\_

Order number (when fees are to be paid by employer): \_\_\_\_\_

Credit/debit card payments can be accepted. Please telephone CSA Group on 01244 670900 with card details.

Signature: \_\_\_\_\_ Date of application: \_\_\_\_\_

**Address for correspondence** (All correspondence relating to MCERTS will be sent to this address).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Tel \_\_\_\_\_

e-mail\* \_\_\_\_\_

Sira Certification Service will maintain a MCERTS register of all certified personnel which will be used to verify and provide information upon request as to whether the individual holds a current, valid certification and the scope of their certification.

By completing this application form, the candidate is entering into a legally enforceable agreement with Sira Certification Service who shall retain authority for all decisions relating to certification.

Invoices will be raised and payments made to CSA Group Testing UK Ltd.

*All information received is treated in strict confidence*

Please supply details of the organisation which currently employs you

Name of Employer \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone \_\_\_\_\_ e-mail\* \_\_\_\_\_

Fax \_\_\_\_\_

Responsible person in organisation (signing to confirm that the details supplied by the applicant are correct and that payment of the registration fee is authorised)

Name \_\_\_\_\_ Signature \_\_\_\_\_

Position \_\_\_\_\_ Date \_\_\_\_\_

Please supply contact details for invoices to be sent to:

Name of Organisation \_\_\_\_\_

Department/Contact Name \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

e-mail\* \_\_\_\_\_

### **Notes**

Please supply the following along with the completed application form:

- 2 Passport-type photographs of yourself (approx. 4.5 cm high x 3.5 cm wide) as follows:

#### **\*e-mail address**

It is important that you provide a legible e-mail address for correspondence, since this is the means by which you will be contacted by CSA Group to be advised of examination dates and locations.

#### **Please submit completed form to:**

MCERTS Co-ordinator  
 Sira Certification Service  
 Unit 6 Hawarden Industrial Park  
 Hawarden, Deeside, CH5 3US

Tel: +44 (0)1244 670 900  
 email: [ukcompetence@csagroup.org](mailto:ukcompetence@csagroup.org)  
[www.csagroupuk.org](http://www.csagroupuk.org)