This form is for institutions or entities only that offer a home energy auditor training program and would like to have the program certified as meeting the Department of Natural Resources division of energy Development criteria. Once the program receives certification, graduates would be eligible for full certification by applying to the Department of Natural Resources division of energy.

### CONTACT INFORMATION

<table>
<thead>
<tr>
<th>INSTITUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>FIRST NAME</td>
</tr>
<tr>
<td>ADDRESS</td>
</tr>
<tr>
<td>COUNTY</td>
</tr>
</tbody>
</table>

### EMAIL ADDRESS

### TRAINING INFORMATION/LOCATION

<table>
<thead>
<tr>
<th>NAME OF TRAINING PROGRAM</th>
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<tbody>
<tr>
<td>ADDRESS</td>
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<table>
<thead>
<tr>
<th>LENGTH OF TRAINING COURSE</th>
<th>HOW MANY YEARS HAS COURSE BEEN OFFERED</th>
<th>FREQUENCY OF TRAINING CLASSES</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>DATES OF NEXT SCHEDULED COURSES</th>
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</thead>
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<table>
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<tr>
<th>STATE CHARTER NUMBER</th>
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</table>

### CHECK WHETHER THE STUDENTS ARE TRAINED ON AND USE THE FOLLOWING EQUIPMENT ITEMS:

- BLOWER DOOR
- DUCT PRESSURIZATION DEVICE
- DIGITAL CARBON MONOXIDE ANALYZER
- GAS LEAK DETECTION DEVICE

- COMBUSTION ANALYZER
- PRESSURE PAN
- DIGITAL THERMOMETER
- DIAGNOSTIC SMOKE

### CHECK WHICH OF THE FOLLOWING SUBJECT AREAS ARE INCLUDED IN THE TRAINING (SEE PROGRAM GUIDANCE FOR MORE COMPLETE DESCRIPTION OF SUBJECT AREAS):

- ENERGY AUDITS
- BUILDING SCIENCE
- CONDUCTION
- RADIATION
- VENTILATION REQUIREMENTS
- WINDOWS AND DOORS
- HEATING AND COOLING DISTRIBUTION (DUCTWORK)
- HEALTH AND SAFETY (COMBUSTION)

- BUILDING ENVELOPE
- HEAT FLOW PRINCIPLES
- CONVECTION
- QUANTIFYING BUILDING ENERGY FLOWS
- HEAT LOSS AND SAVINGS CALCULATIONS
- AIR LEAKAGE TEST (BLOWER DOOR)
- INSULATION
- WRITTEN AUDIT REPORTS
INSTRUCTOR EXPERIENCE (ATTACH ADDITIONAL SHEETS AS NECESSARY)

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
</tr>
</thead>
</table>

RELATED EDUCATION

YEARS EXPERIENCE AS HOME ENERGY AUDITOR

ATTACH THE FOLLOWING:
- Copy of training curriculum and description of training content
- Copy of written exam
- Description of field exam
- Provisions for continuing education units
- Business Brochures (If applicable)
- Website address of business (If applicable)
- Proof of business name registration with Secretary of State (If applicable)
- Proof of general or professional liability insurance of at least $500,000 (Required)

I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true, complete and accurate.

SIGNATURE

DATE

MAIL COMPLETED APPLICATION WITH ATTACHMENTS TO:
MISSOURI DEPARTMENT OF NATURAL RESOURCES
DIVISION OF ENERGY
P.O. BOX 176
JEFFERSON CITY, MO 65102-0176
WEB: energy.mo.gov
EMAIL: energy@dnr.mo.gov
TELEPHONE: 855-522-2796

FOR OFFICE USE ONLY

COMMENTS

MISSOURI CERTIFICATION NUMBER

DATE ASSIGNED

MO 780-2013 (05-21)