

# Professional Pool and Spa Operator Instructor Application

You may complete Part A of this application form at any time in order to apply to become a qualified Professional Pool and Spa Operator Instructor and attend the Train-the-Trainer PPSO Program. APSP will evaluate this portion and will inform your acceptance or denial within 72 hrs. After approval, complete Part B of the application when registering for the Train the Trainer PPSO Program.

APSP understands the challenge teachers face according to data from National Association of State Directors of Teacher Education and Certification (NASDTEC); following this model, APSP has developed a **teaching certificate reciprocity policy**. This program ensures high-quality instructors are given the opportunity to teach regardless of where they prepared for certification. If you hold a current teaching/instructor certification from a public or private organization, you may complete Part A of this application and submit a copy of such certification. APSP’s Education Committee will evaluate your credentials and background. The Education Committee reserves the right to grant or deny teaching certificate reciprocity.

## PART A – Participant’s Qualification and Agreement

First Name	Last Name	Today’s Date
Company Name		
Work Address		
City, State, Zip		
Work Phone	Fax	
Home Address		
City, State, Zip		
Cell Phone	E-mail	

**Check the appropriate box(es) to indicate your professional emphasis:**

- Commercial Pools
- Residential Aboveground/Onground Pools
- Residential Inground Pools
- Spas
- Commercial Spas
- Residential Permanently Installed Spas
- Residential Portable Spas
- Other (please specify):

Number of years in the aquatic industry

### Instructions: Participant’s Qualifications and Agreement

Part A of the Professional Pool and Spa Operator Instructor (PPSO Instructor) application consists of two sections: a series of qualifying questions and commitments, which the applicant must fill in and affirm, and a statement of the agreement between APSP and the applicant. Both sections must be signed by the applicant, and all statements must be affirmed. This application is not valid until accepted and countersigned by an authorized APSP staff representative, and does not confer any right or benefit unless the applicant successfully receives certification as PPSO Instructor.

## Participant's Qualifications and Commitments

Receiving the PPSO Instructor designation is based not merely on the knowledge of how to maintain pools and spas, but to be a PPSO Instructor, candidate must also demonstrate adult teaching skills.

In order to determine candidate's eligibility for the designation of PPSO Instructor, you are required to answer the following questions. APSP may require you to provide additional information to clarify answers before APSP can grant your certification. Any information found to be false, now or in the future, will constitute grounds for the denial or termination of your certification. For the following questions, complete by checking the appropriate boxes and providing explanation when requested. [Answer the following questions:](#)

1. A. Are you a member of the APSP in good standing? .....  Yes  No  
APSP membership #  
B. What is your current occupation:  
C. Do you currently hold, or have you previously held, a position in a company within the swimming pool, spa or related industry for a minimum of three (3) years? .....  Yes  No  
D. Do you currently hold an Instructor status from other organization? .....  Yes  No  
*List below and Include documentation with Application*
  
2. Do you currently hold a Certification as a Pool/Spa Service Professional, or other APSP certification? ..  Yes  No  
*List below organization and provide certification number and expiration date*
  
3. Are there any pending civil actions or outstanding judgments against you that have remained outstanding or unsatisfied for a period of at least 12 months?.....  Yes  No
  
4. If "Yes," please explain:
  
5. Have you or your firm ever been convicted of a felony in the course of your activities, or convicted of fraud or related offenses? .....  Yes  No  
If "yes," please explain:
  
6. Are there any complaints lodged against you or your firm with the Better Business Bureau, consumer protection agencies, arbitration authorities, or local contracting boards that remain unresolved after more than six (6) months?.....  Yes  No  
If "yes," how many complaints? \_\_\_\_\_ Have you responded to these complaints? .....  Yes  No  
Are you able to furnish written documentation to demonstrate that you have responded to these complaints? .....  Yes  No

## APSP Code of Ethics and Required Signature

All members of The Association of Pool & Spa Professionals® shall be requested to observe and be dedicated to the following principles and policies:

- To contribute to the health, safety and welfare of the public in the design, manufacture, installation, maintenance and operation of swimming pools, spas and hot tubs by complying with all applicable laws, ordinances or regulations and refraining from engaging in fraudulent or deceptive acts or practices.
- To hold all necessary federal, state and local licenses, registrations and permits.
- To respect and not infringe upon the intellectual property rights of others and to refrain from using the property of others without their prior, written consent.
- To advertise products, services and prices truthfully and consistently with all federal, state and local advertising practices requirements.
- To clearly communicate prices to potential customers or clients prior to providing such products or services.
- To provide written sales agreements when such are requested by customers or required by law.
- To comply with the terms of all agreements, oral or written, regarding the provision of products or services.
- To respond to any consumer complaints made to any governmental authority, Better Business Bureau or equivalent nongovernmental authority.
- To exclude from company ownership or senior management any person or entity who or which, within the past three (3) years, has been convicted of or pleaded no contest (or its equivalent) to any felony or other crime involving business or financial practices.
- To use the APSP name, logo and other intellectual property only when and as permitted by APSP, and to cease all such use upon suspension from or termination of membership in APSP.
- To file a complaint with APSP regarding a potential violation of this Code of Ethics only when in possession of credible evidence of such potential violation.
- To cooperate fully with any APSP investigation of a potential violation of this Code of Ethics.

Violations of the Code of Ethics are investigated and evaluated by processes outlined in the Governance Policies approved by the APSP Board of Directors.

I affirm, that to the best of my knowledge, all statements made within this document are both true and accurate. I further acknowledge that I have read, understood, and am committed to adhere to the APSP Code of Ethics. I have and maintain a current file of all ANSI/APSP standards (See comment above) and the APSP Workmanship Guidelines. I commit to build all my pools and spas to meet or exceed the appropriate ANSI minimum standards, as well as the APSP Workmanship Guidelines.

Furthermore, I have read, understood, and will comply with the conditions set forth in this agreement. I understand and agree that if I do not complete all the re-certification requirements promulgated by APSP for the PPSO Professional Pool and Spa Operator program by the expiration date, my PPSO credential, registration, and advertising privileges will be terminated.

**Participant's Signature**

**Date:**

**I have read and understand the conditions and agree to the same:**

**Participant's Required Signature:**

**Date:**

**Authorized APSP Staff Signature:**

**Date:**

**Professional Pool and Spa Operator Instructor Application**

**PART B – Registration for Train-the-Trainer PPSO Program**

First Name	Last Name	Today's Date
Company Name	APSP Member # (if applicable)	
Work Address		
City, State, Zip		
Work Phone	Fax	
Home Address		
City, State, Zip		
Cell Phone	E-mail	

**Select One:**

- I would like to attend a TTT PPSO Program at an APSP sponsored event.
  - February 13-14, 2019 | Northeast Spa & Pool Association Headquarters | Hamilton, NJ
  - March 4-5, 2019 | The Association of Pool & Spa Professionals Headquarters | Alexandria, VA
  - Location:

**Payment**

- TTT PPSO Program**     \$795 members     \$995 non-members
- Check Enclosed** (made out to APSP)
  - Charge to:**     VISA     MasterCard     American Express     Discover

Card Number	Exp. date	Security code
Name on Card (print)	Cardholder's Signature	

**Participant's Signature:**

Parts A and B of this application, the TT PPSO application fee, and necessary documentation must be received by APSP National office at least forty-five (45) days in advance of the exam for applicants wishing to attend the class.

**Send completed form and continuing education documentation to:**  
**Attention: Lindsey Turner, Education and Membership Development Manager**  
**APSP University**  
**2111 Eisenhower Ave**  
**Ste 500**  
**Alexandria, VA 22314**

**Questions? lturner@apsp.org | 703.838.0083 ext. 155**