

Certified Stormwater Manager Eligibility Application

Important Instructions — Please Read Before Completing This Application

Carefully review the following instructions **before** filling out your application.

Incomplete or improperly completed applications may result in processing delays or ineligibility. The application must be completed in full.

An **invoice** will be generated and sent to the email address you provide **within one to two weeks** after your completed application is received.

Submission Guidelines

- 1. **Meet all eligibility requirements** before submitting your application.
- 2. An application is considered **complete** only if:
 - o All requested information is **provided**
 - o All responses are **legible**
 - All details are accurate
 Incomplete applications will be returned with a request for missing information, which may cause processing delays.
- 3. **Retain a copy** of your completed application and these instructions for your records.

Application Fee

Instructions: Please indicate your APWA member status and select your payment method below.

Member: \$195 USD

Nonmember: \$245 USD

Accepted Payment Methods:

• Credit Card (Visa / MasterCard / American Express)

• Check or Money Order (payable to **APWA** in **US funds**)

Note: Purchase orders are **not accepted**.

Submit Completed Applications To:

Email: certification@apwa.org

Mail: APWA – Attn: Certification 1200 Main Street, Suite 1400 Kansas City, MO 64105-2100

Payment Method (Select One)

Credit Card (Visa / MasterCard / American Express)

An **invoice** will be generated and sent to the email address you provide **within one to two weeks** after your completed application is received. To provide payment, please **call 1-800-848-2792** and have your **invoice number** ready.

Check / Money Order (Payable to **APWA** in US funds)

Mail your **payment** along with the **completed application** to the address above.

CSM (Rev. 7 2025)



Eligibility Application Process

Participation in the Stormwater Manager Certification Program is open to individuals who meet the specified eligibility requirements. Membership in APWA is not required for application or participation.

The APWA Certification Council reserves the right to request additional documentation or conduct inquiries as necessary to evaluate an applicant's education, work experience, competencies, and moral character.

All communication regarding the certification will be sent to the contact information provided in the application. It is the applicant's responsibility to notify APWA in writing of any changes to their contact information.

Eligibility Requirements

The Stormwater Manager Certification Program consists of the following three components:

- 1. Eligibility Application Process
- 2. Multiple-Choice Examination
- 3. Recertification Process

To be eligible for the certification, candidates must submit an application demonstrating compliance with all of the following requirements:

1. Education and Work Experience

Applicants must meet one of the following education and professional experience combinations:

- High school diploma or equivalent **and** seven (7) years of relevant work experience*
- Associate degree or trade school certificate and five (5) years of relevant work experience*
- Bachelor's degree and three (3) years of relevant work experience*
- Master's degree **and** two (2) years of relevant work experience*
- Doctoral degree and one (1) year of relevant work experience*

Relevant work experience refers to professional roles in stormwater management, typically performed by individuals responsible for planning, coordinating, and implementing stormwater programs within public agencies or private sector organizations serving municipal, state/provincial, or federal entities.

2. Professional Conduct

- A signed agreement to comply with the APWA Standards of Professional Conduct
- A written affirmation confirming **no felony convictions** related to the practice of stormwater management

3. Application Fee

• Submission of the **non-refundable application fee** with the completed application



Applicant Ineligibility

An applicant may be deemed ineligible to take the certification examination for any of the following reasons:

- Insufficient documentation to assess eligibility
- Submitted documentation does not meet the eligibility requirements
- Non-payment of required fees

If an application is found to be incomplete or lacks the necessary documentation, the applicant will be notified and given a deadline to submit the missing information. Failure to provide the required documentation by the specified deadline will result in the denial of the application.

Fees and Payment Methods

The following fees apply to the Stormwater Manager Certification process:

Eligibility Application Fee (non-refundable)

APWA Member: \$195 USDNonmember: \$245 USD

• Examination Fee

o Employer Proctored: \$500 USD

Testing Center: \$500 USD + applicable testing center fees

Recertification Application Fee (non-refundable)

APWA Member: \$195 USDNonmember: \$245 USD

Accepted Payment Methods:

Payment may be made by credit card, check, or money order. All payments must be made in US funds and payable to APWA.

Processing Time

If the application is complete and all requirements are met, the standard processing time is **10 business days** from the date of receipt. Incomplete applications may result in significant delays.

Once the application is reviewed and approved, the applicant will receive an email with instructions on how to apply for the examination.

Important Note: Examination applications submitted with the eligibility application will not be processed.



Part A: Candidate Information
Note: All fields are required unless otherwise indicated. Incomplete applications may delay processing.

First Name:	M	iddle Initial:	Last Name:			
Organization (Agency/Firm):			Job Title:			
Office Address:			City:	State/Province:		
Zip/Postal Code:	_ Country:					
Office Email:			Office Phone Numb	oer:		
Home Address:			City:	State/Province:		
Zip/Postal Code:	_ Country	y:				
Home Email:			Home Phone Numb	oer:		
Preferred Mailing Address:	Office	Home				
 Bachelor's degree and Master's degree and t Doctoral degree and c 	three years of one year of one year of one first the in the first	s of relevant work f relevant work exp relevant work expe ield of stormwater	perience* erience*	experience* clude experience within or for publi		
Indicate Your Highest Level	of Education	n (check one):				
High School Diploma or Equivalent			Master	's Degree		
Associate Degree or Equivalent Trade School Certificat Bachelor's Degree				Doctoral Degree		
bachelof 5 begree						
Education Details						
Institution Name	Dates	Attended	Highest Leve	l of Education Achieved		



Part C: Documentation of Work Experience

Instructions

Based on your education level, determine the number of **years of relevant work experience** you are required to document (refer to the eligibility pathways above). Then complete the form below **for each position** that contributes to meeting that requirement.

Note: You must complete a **new page for each position** or attach a Word document that includes all required information.

Position Information (one form per position)		
Name of Applicant:	J	lob Title:
Name of Organization:	F	Position Held:
Organization Address:		
Dates of Employment (Month/Year): From:	_ To:	Length of Employment:
Summary of Job Responsibilities:		
		pelow of your work experience relevant to stormwater es your experience within or for a public entity in one or more

Important: Incomplete applications or vague descriptions of job responsibilities may result in a finding of **ineligibility**.



Part D: Verification of Work Experience

Instructions: This section must be completed by **two authorized individuals** who can verify the applicant's work experience as described in Part C:

The applicant's **current supervisor** and a representative from **Human Resources** of the organization.

Current Supervisor Verification:	
Full Name of Current Supervisor	
Current Title	
Daytime Phone Number	

I verify that the applicant named in this application is or was employed by the organization I represent. I have reviewed the job responsibilities listed in Part C and confirm that the applicant's experience meets the definition of relevant work experience.*

Signature: _____

Date:	
Human Resources Verification:	
Full Name of Human Resources Personnel	
Current Title	

Daytime Phone Number

I verify that the applicant named in this application is or was employed by the organization I represent. I have reviewed the job responsibilities listed in Part C and confirm that the applicant's experience meets the definition of relevant work experience.*

Signature: _	 	 	
Date:	 	 	

*Relevant work experience must be in the field of stormwater management and may include experience within or for public entities at the local, state, provincial, or federal levels.

Part E: Agreement and Affirmation

Review the following **Standards of Professional Conduct** carefully, then sign and date the section below.

As a candidate for certification, I affirm the following:

- I will keep the public trust and will not take personal advantage of privileged information or relationships.
- I will put public interest above individual, group, or societal interest and consider my chosen occupation as an opportunity to serve society.
- I will encourage sustainability through the wise use of resources, whether they are natural resources, financial resources, or human resources.
- I will consider public health and safety in every aspect of my work.
- I will conduct myself with personal integrity in a manner that enhances and honors the reputation of the profession, my employer, my community, and the association.
- I will ensure that the work for which I am responsible complies with all legal requirements of the local, state, province, or federal governments.
- I will strive to plan, design, build, maintain, and operate public infrastructure in a manner that respects the environment and the ability of government to adequately preserve these assets for succeeding generations.

I agree to adhere to the **APWA Standards of Professional Conduct**, and I affirm that I have no felony convictions related to the practice of stormwater management.

Signature:	 	
Date:	 	

Part F: Candidate Acknowledgement

I certify that all information and documentation provided in this application is true and complete to the best of my knowledge. I understand that APWA reserves the right to verify any information submitted and that submitting this application does not guarantee certification or any associated privileges.

Signature: _	 	 	
_			
Date:			



Part G: Final Checklist

Please review the checklist below to ensure that your application is complete. Incomplete applications may result in delays or denial of eligibility.

Part A: Candidate Information

I have completed all required fields in Part A.

Part B: Documentation of Education

I have indicated my highest level of education completed and/or enclosed a copy of my certificate, diploma, or transcript.

Part C: Documentation of Work Experience

I have documented the required number of years of stormwater experience, based on my education level.

Part D: Verification of Work Experience – Authorized Signatures

I have obtained original signatures from **two authorized individuals** (a current supervisor and a human resource representative) verifying my work experience.

Part E: Agreement and Affirmation

I have read and signed the APWA Standards of Professional Conduct statement.

Part F: Candidate Acknowledgement

I have signed the statement affirming the accuracy and completeness of this application.

Application Submission

I have compiled all required materials into a single application packet and submitted it to APWA.

Submit your completed application to:

Email: certification@apwa.org

Mail: APWA – Attn: Certification 1200 Main Street, Suite 1400 Kansas City, MO 64105