

***Application for Credentialing and / or***

***Re-Credentialing of Medical Gas Verifiers / MGPHO - CMGV***

**1. Applicant must be a member in good standing of the Organization MGPHO. ( 30 days plus membership )**

**2. Applicant must prove possession of a current NITC or MGPHO Approved ASSE 6030 card by submitting a copy of the card with this application.**

**3. Applicant must have a minimum of 2 years of experience verifying medical gas systems. Proof of experience may be requested by the MGPHO Credential Committee or MGPHO BOD.**

**4. Applicant must submit with this application, a current certificate of general liability insurance in the amount of $1,000,000 or greater. The certificate must name the individual or the company employing the applicant as a medical gas verifier.**

**5. New applicant are required to perform an oral interview and a review of their testing equipment. The applicant must have their testing equipment on site for this oral interview and past the procedure before the written portion of the test can be taken. Equipment shall be per ASSE 6030 (latest version) and NFPA 99 (latest version).**

**6. Renewal applicant affirms that he/she will maintain all medical gas verification equipment and medical gas equipment calibrations in accordance with ASSE 6030 (latest version) and NFPA 99 (latest version).**

**7. Affirmation:**

**The undersigned applicant hereby swears to follow the above-stated protocol. If the applicant fails to follow the protocol outlined above or any items listed in The MGPHO By-Laws and Policy and Procedure Manual, he/she will surrender his or her MGPHO / CMGV credential or face review by the MGPHO Ethics Committee.**

**Signature:**

**Printed Name:**

**Company:**

**ASSE 6030 #:**

**Date:**

*For Internal Use Only:*

**Test Edition:**

|  |  |  |
| --- | --- | --- |
| **Exam Date:** |  | |
| **Proctor:** |
| **Check No. & Amount:** |
| **Test Result: Equipment Review:** | **Pass** o  **Pass** o | **Fail** o  **Fail** o |