ISA Certifications

ISA Certified Tree Worker Aerial Lift Specialist® Candidate Application Handbook

Notice: Beginning June 1, 2015 ISA will begin requiring objective verification of candidate eligibility. This means candidates claiming eligibility from work experience or educational background will be asked to provide the following:

- Transcripts for your relative education
- Dated invoices from each year of work experience
- Employer provided information

The candidate will only need to provide documentation for the eligibility experience they are claiming. For example, if exam eligibility is based on 3 years full time work experience then invoices or letters of reference will suffice. Applications that do not include the required documentation will be denied and returned to the candidate.
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Purpose and Scope of the ISA Certified Tree Worker Aerial Lift Specialist® Program

Certification is a voluntary program that results in peer recognition of your professional knowledge and skill. Becoming ISA Certified also builds your self-image. By studying for and passing the certification exam, you demonstrate a thorough knowledge of and dedication to correct arboriculture practices. Certification provides the public and those in government the opportunity to make an informed selection of services based on the expertise represented by your credential. The process of becoming ISA Certified and maintaining the designation provides personal incentive to continue your professional development. Certification is also a tool to assist employers in training their existing personnel and selecting new employees.

Exam Content and Objectives

The certification examination was developed by a panel of industry experts representing all aspects of arboriculture. Questions were derived from a job task analysis survey filled out by arborists from around the world. Questions are continually analyzed by the ISA Certification Test Committee using the latest test statistics, and new questions are always being developed. Questions that do not perform satisfactorily are removed from the question bank. Updated examinations are created on a regular basis.

The written exam content is divided into eight areas of knowledge:

1. Safety .................................................. 18%
2. Removal ................................................. 12%
3. Rigging ................................................. 12%
4. Pruning ................................................. 18%
5. Cabling ............................................... 6%
6. Tree Sciences ....................................... 10%
7. Tree Identification .............................. 10%
8. Electrical Hazard Awareness Program .... 14%

The purpose of the aerial lift skills exam is to assess the applicant’s ability to demonstrate the fundamental skills necessary to perform as a competent aerial lift operator when working in trees. The primary emphasis throughout the exam is safety.

The objectives of the Certification Program are to:

- Create incentives for individuals to continue their professional development;
- Provide the public and those in government with a means to identify professionals who have demonstrated through a professionally developed exam that they have thorough knowledge and skill in tree care practices.

Participant Eligibility Requirements

The ISA Certification Board requires a candidate to have a minimum of 18 months (1.5 years) of experience in arboriculture and at least six months of experience in the operation of an aerial lift device within the overall 18 months.

Documentation of work experience is required with submittal of application. Letter(s) of reference from your current or previous Employer(s) is acceptable.

If you are self-employed or own your own company, you will be required to submit three letters of reference with your application. References may be in the form of copies of invoices, contracts, and/or business licenses.

The candidate must also show proof of valid hands-on training in CPR and first aid. The candidate must include proof of a physical (practice) Aerial Rescue training within the past year. See application section for acceptable verification options.

By submitting your application, you authorize ISA to contact the practical experience reference(s) named on your application to substantiate your eligibility.

Examination Format

The examination consists of two parts:

- The written portion is made up of 65 multiple-choice questions. Each question has four possible answers listed, only one of which is correct. You will have 1.5 hours (90 minutes) to complete the written exam.
- The skills-based part of the exam is an outdoor practicum. You will have .75 hours (45 minutes) to safely and successfully complete it.

You must pass both parts to obtain the certification.

You will need to specify on your application whether you are taking the entire exam or wish to take one part of the exam to achieve a passing score.
Pretesting of Exam Questions
Within the written exam, there will be 15 new questions that have not been used on previous exams. Inclusion of these questions allows for collection of meaningful data about development of new exam questions. Responses to these questions are not used in determining individual exam scores. These 15 questions are not identified and are scattered throughout the exam so that candidates will answer them with the same care as the questions that make up the scored portion of the exam. This methodology assures candidates that their scores are the result of sound measurement practices and that scored questions reflect current practice.

Application Process

Exam Dates and Locations
ISA Certified Tree Worker Aerial Lift Specialist® written exams are offered through an ISA chapter- or associate organization-sponsored exam or through a Pearson VUE testing center. The skills portion of the exam is held only as an ISA chapter- or associate organization-sponsored event. For information on dates and locations of ISA chapter- or associate organization-sponsored certification exams in your area, contact ISA or visit the ISA Events Calendar at www.isa-arbor.com/events/eventsCalendar/index.aspx. To find out if a Pearson VUE testing center is close to you, visit http://www.pearsonvue.com/isa/locate/.

Fees
Candidates who are members of ISA and their local chapter or associate organization receive an exam discount. If the exam is an ISA chapter- or associate organization-sponsored exam, the fee is $135 USD for members and $195 USD for nonmembers. In addition to the exam fee, there is a computer-based testing administrative fee of $125 USD for those who elect the computer-based option. The administrative fee applies each time a computer-based exam is scheduled.

To be eligible for the discounted rate, a candidate must be a current member of ISA and a current member of an ISA chapter or associate organization.

ISA certification fees are separate and distinct from ISA membership dues and ISA chapter or associate organization dues.

Certification Agreement and Release Authorization
All applicants are required to review and accept the Certification Agreement and Release Authorization found at the end of the application. Your signature confirming review and acceptance of these terms is required for certification.

Submission of Application
Becoming ISA Certified is a two-step process through your My Profile ISA website account.

1. Apply to sit for a certification exam.
2. After your application is approved, you may enroll to take the exam.

If you do not have an ISA website account you can create one at https://www.isa-arbor.com/myaccount/createaccount.aspx.

A completed application must be submitted through your ISA My Profile website account by choosing the Applications link, http://www.isa-arbor.com/myaccount/myprofile/CAPS.aspx, and selecting Create Application.

Once your completed application has been reviewed, you will be notified by ISA of your application approval or denial through e-mail. You may check the Applications section at any time to determine your status or view old applications. If denied, you must complete a new application when applying for a credential.

Once approved you must enroll into the exam by selecting either the enrollment link within the approval e-mail or within the Applications section of My Profile. Enrollment will include the processing of applicable exam fees. Enrollment and payment must be received on or before the deadline date. ISA does not provide refunds for exam enrollments. There are no exceptions to this policy.

There is no deadline date for computer-based exams. For ISA chapter- or associate organization-sponsored exams, the deadline date is 12-US business days prior to the scheduled exam date.

If you have questions or difficulties with the application or enrollment process, contact ISA.

Due to the complexity of the application process, onsite registrations are not available for ISA exams.

ISA has the right to contact any person or organization as part of the review of your application. By applying, you authorize the release of any information requested by ISA for the purpose of reviewing your application. ISA has the right to notify appropriate organizations if your application contains false information.

Confirmation
You will be notified when your enrollment has been processed. After you have been successfully enrolled, you will receive a confirmation packet with a letter containing the location, date, time of the exam, and the
name of the appropriate contact person. For computer-based exams held through Pearson VUE, you will receive instructions via email on how to schedule a date and time with the computer-based testing vendor. The vendor will then send you a confirmation including the location, date, and time of the exam. You are provided a 90-day authorization period to schedule and take the exam.

**Rescheduling Exam or Additional 90-Day Authorization Period Requests**

If circumstances change after you have applied for the examination, you must request in writing to have the exam rescheduled or request an additional 90-day computer-based authorization period. A fee of $50 USD applies to both types of requests. ISA chapter- or associate organization-sponsored exam requests must be received prior to the 12-business-day deadline. Additional 90-day computer-based authorization requests must be received within the candidate’s current 90-day authorization period. If the request does not reach ISA before the ISA chapter- or associate organization-sponsored exam deadline date, or is beyond the 90-day authorization period, or the candidate fails to schedule an exam within the 90-day authorization period, the candidate will be considered a no-show and all exam fees will be forfeited. If the scheduled date was your free retake, your free retake will be forfeited. If you need to reschedule an exam date within your current 90-day authorization period with the computer-based testing vendor, you may do so no later than one business day prior to the scheduled exam date. If contact is made in less than one business day, you will be considered a no-show and will forfeit all exam fees. Registrations are not transferrable to another person. If you need to reschedule the exam, you may do so by contacting Pearson VUE via phone or through their website [http://www.pearsonvue.com/isa/contact/](http://www.pearsonvue.com/isa/contact/). If rescheduling during the weekend, you must do so directly through their website.

**Preparing for the Exam**

**Before You Leave**

The ISA *Tree Climber’s Guide*, 3rd Edition (Lilly, 2005) is intended to serve as a recommended program of study. Other recommended study materials include:

- ANSI A300 Standard for Tree Care Operations (Part 1) – Pruning.
- ArborMaster® Training Series DVDs.
- ISA/TCIA, 1999. *Basic Training for Tree Climbers DVD.*

In addition, the Certified Tree Worker Aerial Lift Specialist Exam Preparation DVD is available from ISA. This 15-minute video guides the applicant through the entire skills exam and explains what is expected from the candidate during the skills test.

**Note:** The *Tree Climber’s Guide*, published by ISA, should NOT be considered the sole source of information for the certification examination.

The publications referred to above can be purchased from ISA at +1.217.355.9411 or [www.isa-arbor.com](http://www.isa-arbor.com) and also through your local ISA chapter or associate organization.

**Skills Exam Preparation**

This section is designed to inform the ISA Certified Tree Worker Aerial Lift Specialist® applicant of the requirements to pass the aerial lift skills test. It outlines, in detail, what you need to know and what skills must be demonstrated during the test.

**Understanding the Evaluation Form**

The evaluation form that is used to assess the applicant’s skills is designed to be as fair and objective as possible. Every attempt has been made to eliminate bias on the part of the evaluators. Every applicant will be judged by at least two trained evaluators. The skills to be demonstrated are outlined in specific task statements. Each task statement includes performance standards that indicate exactly what constitutes successful completion of the task. You may view the skills form at [http://www.isa-arbor.com/certification/resources/AerialLiftSkillsTestEvaluationForm.pdf](http://www.isa-arbor.com/certification/resources/AerialLiftSkillsTestEvaluationForm.pdf).

Each evaluator judges the candidate’s performance of each task to be either satisfactory or unsatisfactory. Candidates begin with 750 points. Points are deducted for each unsatisfactory performance of a task. The point deductions are proportional to the importance of the task. In order to pass the skills test, an applicant must have a minimum of 600 points.

Certain tasks, determined to be skills that are critical to an aerial lift operator’s competency, carry a point value of 151 points. That means if a candidate fails to satisfactorily complete any critical tasks, he/she will fail the skills test. One example of a critical task is the ability to successfully move within the tree without inadvertently contacting the tree with the boom.

**Pre-ascent Inspections.** Applicant must demonstrate a pre-ascent inspection of his or her equipment. This includes a manual and visual inspection of the personal...
The point deduction for failure to tie each knot to the evaluator, it is considered to be an attempt.

When the candidate hands the tied main skills test.

Four of these must be tied correctly to proceed to six additional knots within a one-minute limit. When the candidate hands the tied main skills test.

Knot Tying. Applicants must demonstrate the tying of six additional knots within a one-minute-per-knot time limit. Four of these must be tied correctly to proceed to the main skills test. Each knot must be correctly dressed and set on the first attempt in order to receive a satisfactory mark. When the candidate hands the tied knot to the evaluator, it is considered to be an attempt. The point deduction for failure to tie each knot successfully is 35 points. The following are the required knots:

1. Bowline
2. Running bowline
3. Cow hitch with a better half OR timber hitch
4. Sheetbend OR quick hitch
5. Clove hitch with two half hitches
6. Midline knot: clove hitch OR butterfly

Tree and Site Inspection. (must be completed within 15 minutes)

Each applicant must do a pre-ascent inspection of the tree and site. If this task is not completed satisfactorily in the allotted time of 15 minutes, the operator will fail the exam. The purpose of this is to check for the location of any electrical conductors, as well as basal and structural tree hazards or safety risks. Inspection should include:

- Location of utilities and wires
- In-ground targets
- Above-ground targets
- Tree structure/stability

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- Above-ground targets
- Tree structure/stability

Truck Inspection. At the pre-ascent inspection, the applicant will be required to perform a walk-around visual inspection of the truck and aerial lift, calling out what is being inspected and describing defects that would render the truck or aerial lift unusable. Items to be inspected will include:

- Documentation of pre-trip (Department of Transportation inspection): sticker OR exemption paperwork
- Lift manual in the truck
- Condition of bucket and liner
- Placement and condition of stickers
- Guard, covets, placards are in place and in good condition
- Fluid levels
- When and where to lubricate
- Leaks, cracks, and welds on the outriggers, if applicable
- Cracks, cuts, and excessive wear on upper and lower boom fiberglass

Failure to inspect each of the following items will result in failure of the examination:

- Operator demonstration of bucket movement utilizing ground controls
- Lubrication, brakes, adjustments, and broken wires in the drive cables and bucket-leveling cables or cracks and welds on the chains
- Bolts, welds, and cracks on the pylon mast (pedestal)
- Leaks, breaks, and wear on hoses
- Welds, rod-ends, and leaks on drive cylinders

Knot Tying. Applicants must demonstrate the tying of six additional knots within a one-minute-per-knot time limit. Four of these must be tied correctly to proceed to the main skills test. Each knot must be correctly dressed and set on the first attempt in order to receive a satisfactory mark. When the candidate hands the tied knot to the evaluator, it is considered to be an attempt. The point deduction for failure to tie each knot successfully is 35 points. The following are the required knots:

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- Leaks, breaks, and wear on hoses
- Welds, rod-ends, and leaks on drive cylinders
**Hand Saw Work Station.** Operator demonstrates controlled use of lift.

- Operator must demonstrate smooth, controlled approach and positioning to ring bell **OR** touch flag with hand.
- If operator has uncontrolled contact with a limb greater than 4 inches (10 cm) **OR** the tree, **OR** breaks a limb 3 inches (7.5 cm) or larger, the operator will fail the exam.

**Setting Rigging/Safety Line Work Station.** Operator is required to throw a rope into a branch union 6 to 8 feet (1.8 to 2.4 m) from the station marker and retrieve the working end.

- Operator has three attempts to set the rope in the branch union to demonstrate minimum proficiency and rope control, or operator will be deducted 35 points.
- Working end and running portion of rope must be controlled in the operator’s hands.
- If the operator has uncontrolled contact with a limb greater than 4 inches (10 cm) **OR** the tree, **OR** breaks a limb 3 inches (7.5 cm) or larger, the operator will fail the exam.

**Pole Saw/Pruner Work Station.** Operator demonstrates controlled use of lift while demonstrating the use of a pole saw or pruner to contact bell or flag.

- Operator must demonstrate smooth, controlled approach and positioning to ring the bell **OR** touch the flag with the pole saw/pruner.
- Pole saw/pruner cannot be dropped or operator will fail the exam.
- Operator must lower the rope and retrieve the pole saw/pruner.
- Operator must untie and use both hands on the pole saw/pruner while contacting the bell or flag.
- Operator must lower the pole saw/pruner safely to the ground by use of the rope with a recognized friction hitch.

**Descent.** Operator demonstrates smooth operation to the cradle boom.

- Operator must demonstrate smooth, controlled descent and cradling of the bucket.
- Aerial lift bucket must be firmly in the cradle at the end of the exam.

- If operator has uncontrolled contact with a limb greater than 4 inches (10 cm) **OR** the tree, **OR** breaks a limb 3 inches (7.5 cm) or larger, the operator will fail the exam.

**Skills Exam Time Limit.** The entire exam must be completed within 45 minutes.

**Items to Bring with You**

For the skills exam, each aerial lift operator candidate should bring the appropriate personal protection equipment that meets all pertinent safety standards including:

- Hardhat
- Safety glasses
- Work boots
- Fall arrest belt/harness
- Energy absorbing lanyard **OR** lanyard with double locking snaps
- Attachment point to boom
- Appropriate work clothing

All personal protective equipment, fall protection, and the aerial lift device shall, at a minimum, satisfy Department of Transportation, OSHA and ANSI (for U.S.), CSA (for Canada), or other relevant standards that apply in that jurisdiction. Rope snaps should be of the locking type. Failure to abide by these rules may result in the applicant’s failure of the skills examination.

The skills examination is designed to simulate actual working conditions. Equipment used by operators must provide adequate protection for use in working conditions.

**At the Exam**

**Admission**

To be admitted for testing, you must arrive at the testing site on time and have your identity confirmed by providing two forms of valid identification. One form of identification will be a valid photo identification card and the other form will be an identification card displaying your signature. The exam host will check your photo identification. If you do not have photo identification with you at the check-in time of the exam, you will not be allowed to sit for the exam and will be considered a no-show.

There will be audio and video taping at the testing centers. If you are not prepared to be taped, you will not be allowed to test at the facility.
Site Rules

- The exact time, date, and location of the course will be enclosed in your confirmation packet.
  You must be on time, as the exam will begin promptly. Report to the exam site at least 30 minutes before the exam starts.
- Dress appropriately. While every attempt is made to provide a comfortable classroom atmosphere, heating or cooling systems may not function properly. Outdoor weather conditions may vary.
- Visitors are not allowed into the exam.
- Books, papers, and other reference material will not be allowed in the testing area.
- No cell phones, pagers, or personal digital assistants will be allowed in testing area.
- No food or beverages may be taken into the exam.
- No smoking will be allowed in the testing area.
- You will be permitted to take restroom breaks on an individual basis. Time spent on breaks will come out of the time permitted for completing the exam.
- Applicants and evaluators are expected to comply with all relevant OSHA, ANSI, CSA, or other safety standards and requirements that apply in the relevant jurisdiction. The skills examination is designed to simulate actual working conditions. Equipment used by climbers must provide adequate protection for use in working conditions.
- During the exam:
  » Writing on the test booklet is not allowed.
  » If you are caught looking at another individual’s exam or talking during the exam, scores may be invalidated or exam materials confiscated.
  » Applicants who are impaired by the use of alcoholic beverages or illegal drugs, or use them at the examination site, will be immediately disqualified from taking the examination.
- It is of utmost importance that you carefully follow all directions and regulations. Listen carefully to all instructions given by the exam administrator, and follow the directions completely.

Inappropriate Application and Examination Conduct

ISA intends that participation in its certification programs will be a professionally relevant, informative, and rewarding experience for all candidates. All participants in ISA certification exams are expected to conduct themselves in an appropriate and professional manner and to refrain from any objectionable, improper, or unprofessional conduct. To ensure fairness in an examination environment, the following policy and rules apply:

- When an ISA or ISA-designated representative finds that a candidate has engaged in inappropriate conduct or behavior, ISA reserves the right to respond with actions including, but not limited to, the following:
  » Rejecting an application for qualification
  » Preventing or precluding a person from participating in an examination, including removing a person from the testing site
  » Invalidating or nullifying examination results
  » Issuing and enforcing any other lesser response or action determined to be appropriate or necessary
- Inappropriate conduct or behavior includes, but is not limited to, misrepresentation; failure to disclose requested information; cheating; unauthorized possession, use, or distribution of copyrighted or legally protected material; verbal or physical disturbances of the examination; failure to pay fees in a timely manner; and any other objectionable, improper, or unprofessional actions by a person participating in the ISA certification process.
- By submitting an application for certification, each participant acknowledges that he/she understands and agrees to the terms of this policy.

Failure to Attend Examination or Schedule within a 90-Day Authorization Period

No refunds or discounts will be issued if you do not attend the examination. There are no exceptions. If you do not reschedule your appointment or request an authorization extension within the required timeframe, and you do not show up to take the exam at your scheduled time and location, you will be considered a no-show. This will result in losing your one free retake or forfeiting your exam fees. If this happens, you will have to resubmit your application along with the required retake fees and, if elected, the computer-based administrative fee of $125 USD. You will have only one year from the first scheduled exam date to retake the exam at the retake fee of $75 USD. Once you have exceeded the one year, you will be required to pay the full exam fee, along with the $125 USD computer-based administrative fee if you elected the computer-based option.
Obtaining the Certification

Requirements for Completion
The ISA Certified Tree Worker Aerial Lift Specialist® exam includes both written and skill-based components. To obtain the credential, you must achieve the required passing scores for both parts of the examination. The passing scores are 70 percent for the written component and 80 percent for the skill-based component.

When you receive your written exam results, please remember that the domains are weighted, and the average of the domains will not be equal to the overall score.

Once certified, you will receive the designation of ISA Certified Tree Worker Aerial Lift Specialist®.

If you do not achieve an overall passing score on both components, you must retake the component that you did not pass until an overall passing score is achieved.

Your certification is personal to you and may not be transferred or assigned to any other individual, organization, or entity. When publicizing your credential, you must comply with the requirements in the ISA Branding and Style Guide, found at https://www.isa-arbor.com/styleGuide/ISA_BrandingGuide.pdf.

Exam Scoring
The computer-based exams are graded by the testing vendor. ISA chapter- or associate organization-sponsored written exams are graded at ISA Headquarters. The skill-based exam is scored on site by the instructor administering the exam and sent to ISA Headquarters. ISA will notify you of your detailed results. You may access a brief overview of your results by logging into MyISA on the ISA website and selecting Exam Results under My Profile.

Examination Results and Notification of Certification
Computer-based exams provide result notification immediately upon completion of the exam. Your formal results will be sent approximately six weeks after your exam date. You will be notified of your pass/fail result. Percentage scores will be provided for each domain for your information and a pass/fail result will be provided on the skills exam. Those who pass will receive a congratulatory letter, score sheet, certificate, identification card, hard-hat decal, and patch.

Your results are confidential. Results cannot be obtained over the phone or by fax.

If you have questions concerning your exam results, direct them in writing to the ISA Certification Department at isa@isa-arbor.com. Because of the need to maintain test security, exam booklets cannot be made available for review of the questions and answers, and the ISA Certification Department does not provide a list of questions that were answered correctly or incorrectly. The only information available regarding your performance on the exam is provided on your score report.

Request for Regrading of Examination
If you believe that an error was made in the grading of your exam, you may request to have your exam regraded. A fee of $35 USD applies for each hand-graded score report. Requests for regrading may take up to six weeks for completion. If you request to have your exam regraded, you may not schedule another exam until after you receive the regrading results. If you wish to have your exam regraded after receiving your initial score report, please contact isa@isa-arbor.com.

Retaking the Examination
If you do not pass both the written and skill-based components of the exam, you will receive a failure notification and details for retaking the corresponding component of the exam.

You are allowed one free retake and then a $75 USD fee per retake up to one year from the original date that you took the exam. If you do not attain passing scores within one year of the original exam date, you will be required to pay the full fee amount. Each time a computer-based exam is selected, the $125 USD administrative fee applies.

What May Be Stated About Certification Holders
By passing the exam, holders of ISA certifications have demonstrated a broad base of knowledge in the area in which they are certified. No other conclusions may be drawn concerning certification holders. ISA certifications do not represent licensure, registration, or other authorization to practice or to conduct business activities for a fee or otherwise.

The ISA Certified Tree Worker Aerial Lift Specialist® credential is subject to ongoing requirements, such as participation in continuing education activities and terms of the Certification Agreement and Release Authorization. There is no code of ethics requirement for this credential.

Expiration and Recertification
ISA Certified Tree Worker Aerial Lift Specialist® certification is valid for three years. To retain certification after each three-year period, an ISA...
Certified Tree Worker Aerial Lift Specialist® must recertify. The ISA Certification Program offers two methods of recertification. The first method is to retake and re-pass the certification exam. The second option is to accumulate at least 15 continuing education units (CEUs) over the three-year certification period that relate to the eight tested domains on the exam; provide current proof of training in cardiopulmonary resuscitation (CPR), first aid, and completion of a physical (practice) aerial rescue; and pay the recertification fee.

Candidates who are members of both ISA and their local chapter or associate organization receive a discount on their recertification fees. The non-member recertification fee is $90 USD. For members, the recertification fee is $65 USD.

Please visit http://www.isa-arbor.com/certification/maintainCredentials/index.aspx for detailed information on maintaining your credential. You may contact ISA at isa@isa-arbor.com if you need further clarification.

Notify ISA promptly if your contact information changes. We are not responsible for undeliverable notifications.

You have the option of checking your CEUs online via the ISA website. If you do not have a username and password to access to your CEU report, please email ISA at isa@isa-arbor.com.

CEUs, current proof of training, and proper payment must be received in the ISA office in a timely manner. Allow four to six weeks for processing and posting to your account.

**Denial, Revocation, and Decertification**

Your certification may be denied or revoked for any of the following reasons:

- Falsification of application
- Violation of testing procedures
- Misrepresentation of your identity or other information

In the event that your ISA certification is denied or revoked or you otherwise become decertified, you must immediately stop using and/or displaying the ISA certification mark, credential, and any other designation indicating an affiliation with the ISA Certification Program. You must comply with any additional directives of the ISA Certification Program.

**Nondiscrimination**

The ISA Certification Program does not discriminate in determining eligibility on the basis of race, color, religion, sex, national origin, age, disability, or any other characteristic protected by law.

**Accommodations for Participants with Disabilities**

It is the intent of ISA to provide accessibility to ISA exams to any qualified participant with a documented disability upon reasonable notice and without requiring ISA to take action which would result in a fundamental alteration in the nature of the exam or an undue financial burden to ISA.

If you have a special need and require an accommodation for an exam, please complete the Special Accommodations Request Form at http://www.isa-arbor.com/certification/resources/cert_Accommodations Request.pdf and submit it with your application or retake form. Your request will be reviewed and you will be notified of a determination. Approved accommodations are provided through our computer-based vendor at no additional charge to you.

**Appeals and Complaints**

Complaints and appeals are accepted and resolved in accordance with the ISA Credentialing Appeals and Complaints policy, available at www.isa-arbor.com/certification/resources/cert_Credential_Appeals.pdf.

**Privacy**

By applying for an ISA certification, you authorize ISA to make your contact information available to your local chapter or associate organization and our professional affiliates so they can share information with you about educational seminars and other events.

ISA shares your contact information, pass/fail exam result, expiration date, and other relevant details with your ISA chapter or associate organization so that they may monitor your credential status and administer credential-related services.

Your name, location, and credential will be available to members of the public on the ISA web site.

Some credential holders do not wish their names to be distributed to the public or to other interested parties (vendors, potential employers, etc.). If you do not wish to have your name included on the ISA web site or on distribution lists, contact the ISA Certification Department at isa@isa-arbor.com.

You will be notified of whether or not you passed the certification examination, but your score will not be disclosed to any third party except as noted above. Your status as a certification holder, past or present, and dates of certification may be disclosed to third parties.
ISA CERTIFIED TREE WORKER AERIAL LIFT SPECIALIST® APPLICATION

This application must be received at least 12 WORKING DAYS prior to the date of the chapter or associate organization exam for which you are applying. There is no deadline for the computer-based exams. If your application is approved, you should receive a confirmation letter. If you do not receive this letter, contact ISA at +1.217.355.9411.

Note: Your name must be listed exactly as it appears on your government issued photo identification. If your name does not match your government issued photo identification, you will not be allowed to take the exam and will forfeit your exam fees.

1. PRINT YOUR NAME EXACTLY AS IT APPEARS ON YOUR GOVERNMENT ISSUED PHOTO IDENTIFICATION CARD

2. COMPANY NAME (IF APPLICABLE)

3. NUMBER AND STREET

<table>
<thead>
<tr>
<th>LOCALITY/CITY</th>
<th>PROVINCE/STATE</th>
<th>POSTAL CODE/ZIP CODE</th>
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</table>

The address you indicate will be used for all future correspondence by ISA. In addition, you can elect to have this information published and distributed in ISA Certified Tree Worker Aerial Lift Specialist® lists.

4. Contact Phone Number ___________________________ Fax Number ___________________________

E-mail Address Required for Enrollment ___________________________

5. Member of ISA □ Yes □ No Identification Number ___________________________

6. Member of ISA Chapter □ Yes □ No Chapter ___________________________

5. Please check here if you would like to take the Knowledge exam via computer-based testing. □

If electing to take the exam via computer-based testing leave 6-7 blank

6. Date you wish to take the Knowledge exam _____/_____/._______ (non-computer-based exam)

   MONTH   DAY   YEAR

7. Location of Knowledge exam ___________________________

<table>
<thead>
<tr>
<th>LOCALITY/CITY</th>
<th>PROVINCE/STATE</th>
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</table>

8. Date you wish to take the Skills exam _____/_____/._______

   MONTH   DAY   YEAR

9. Location of Skills exam ___________________________

<table>
<thead>
<tr>
<th>LOCALITY/CITY</th>
<th>PROVINCE/STATE</th>
</tr>
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</table>

10. Are you requesting a special accommodation? □ Yes □ No (If Yes, you must enclose form)

11. Language Options (check which option you prefer based on where you're testing)

<table>
<thead>
<tr>
<th>Computer-based Testing Options</th>
<th>Chapter or Associate Organization Sponsored Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>English: □</td>
<td>English: □</td>
</tr>
<tr>
<td>Japanese: □</td>
<td>Traditional Chinese: □</td>
</tr>
<tr>
<td>Spanish: □</td>
<td>Japanese: □</td>
</tr>
<tr>
<td></td>
<td>Spanish: □</td>
</tr>
</tbody>
</table>
12. Include the information requested below for the truck you will bring with you to the skills exam:

- **Aerial Lift Manufacturer:** __________________________
- **MAX Working Height:** _______________ foot / meter
- **Side Reach:** _______________________________ foot / meter

**Note:** Submitting your application does not guarantee enrollment. Enrollment is based on meeting eligibility criteria and availability.

13. Some ISA Certified Tree Worker Aerial Lift Specialist® do not wish their names to be distributed to the public or to other interested parties (vendors, potential employers, etc.). If you do **NOT** wish to have your name included in ISA Certified Tree Worker Aerial Lift Specialist® lists for distribution, please indicate here. ☐

14. **Documentation of Work Experience is Required for Approval**

*(You are required to provide one of the following):*

1. **Employer provided information examples:**
   - A letter(s) of reference from current or previous Employer(s) which must include:
     - Contact information
     - Job responsibilities
     - Dates of employment
     - Employer signature

2. **Self-employed requirements:**
   - Invoices and/or letters of reference from the past 18 months which must include:
     - Contact information
     - Applicants job responsibilities
     - Dates of work performed
     - Customer experience
Applicant Name: ____________________________

**Employer Provided Information** (this information is required for application approval)

Current or Most Recent Employer (Company Name) ____________________________________________

Applicant’s Position Title ________________________________________________________________

Employer Contact Person ___________________ Phone Number _____________________________

Employer Contact Person’s Title __________________________________________________________

Address of Employer _________________________________________________________________

<table>
<thead>
<tr>
<th>LOCALITY/CITY</th>
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<th>POSTAL CODE/ZIP CODE</th>
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</table>

List Essential Duties and Responsibilities of Applicant

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Applicant Employed:

____________________________________________________________________________________

FROM MONTH __ YEAR __ TO MONTH __ YEAR __ TOTAL TIME ____________________________

**Employer Signature**

By signing below, you acknowledge the employment information you provided in this application for the applicant is accurate and complete to the best of your knowledge.

Employer Name ____________________________

PRINT YOUR NAME __________________________

Employer Signature ____________________________ Date ____________________________

*If there is not enough space to list the required experience with your current and previous employers, please attach an additional sheet.*
Applicant Name: ________________________________

Previous Employer Provided Information (this information is required for application approval)

Previous Employer (Company Name) __________________________________________________________

Applicants Position Title _________________________________________________________________

Employer Contact Person ___________________________ Phone Number ________________________

Employer Contact Person’s Title _____________________________________________________________

Address of Employer ______________________________________________________________________

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<thead>
<tr>
<th>LOCALITY/CITY</th>
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</thead>
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List Essential Duties and Responsibilities of Applicant

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Applicant Employed:

FROM MONTH YEAR TO MONTH YEAR TOTAL TIME

Employer Signature

By signing below, you acknowledge the employment information you provided in this application for the applicant is accurate and complete to the best of your knowledge.

Employer Name ___________________________

PRINT YOUR NAME

Employer Signature ___________________________ Date ___________________________

If there is not enough space to list the required experience with your current and previous employers, please attach an additional sheet.
### Applicant Name: ____________________________________________

### Previous Employer Provided Information (this information is required for application approval)

- Previous Employer (Company Name) ______________________________________________________
- Applicants Position Title ________________________________________________________________
- Employer Contact Person _________________________ Phone Number ________________________
- Employer Contact Person’s Title __________________________________________________________
- Address of Employer ___________________________________________________________________

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<th>LOCALITY/CITY</th>
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List Essential Duties and Responsibilities of Applicant

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
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____________________________________________________________________________________

Applicant Employed:

<table>
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<tr>
<th>FROM MONTH</th>
<th>YEAR</th>
<th>TO MONTH</th>
<th>YEAR</th>
<th>TOTAL TIME</th>
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</table>

**Employer Signature**

By signing below, you acknowledge the employment information you provided in this application for the applicant is accurate and complete to the best of your knowledge.

- Employer Name______________________________
  PRINT YOUR NAME

- Employer Signature______________________________ Date________________________

*If there is not enough space to list the required experience with your current and previous employers, please attach an additional sheet.*
15. Verification of CPR, First Aid, and a Physical (Practice) Aerial Rescue Training

To be eligible to take the ISA Certified Tree Worker Aerial Lift Specialist® Exam, the candidate must include proof of valid hands-on training in CPR and first aid. The candidate must include proof of a physical (practice) Aerial Rescue training within the past year.

Note: This information is required for application approval. Must attach necessary documentation and proof.

Proof of training in CPR can be any one of the following:

(Please check the appropriate item and include copy of card, certificate, or verification)

_____ A copy of a valid CPR card from the Red Cross or American Heart Association.

_____ A certificate of completion in training of CPR. ISA reserves the right to verify source of training.

_____ Other – Please contact the ISA for approval

_____ A written verification from employer – Please complete the information below.

I hereby certify that my employee __________________ has completed training in CPR.

By: __________________________________________ Supervisor/Manager/Owner
(Please circle)

Of: ____________________________________________
(Company Name)

Date of completion of training: ____________________

Proof of training in first aid can be any one of the following:

(Please check the appropriate item)

_____ A copy of a valid first aid card from the Red Cross.

_____ A certificate of completion in first aid training. ISA reserves the right to verify source of training.

_____ Other – Please contact the ISA for approval.

_____ A written verification from employer – Please complete the information below.

I hereby certify that my employee __________________ has completed training in first aid.

By: __________________________________________ Supervisor/Manager/Owner
(Please circle)

Of: ____________________________________________
(Company Name)

Date of completion of training: ____________________
Proof of training in a physical (practice) aerial rescue can be any one of the following: (Please check the appropriate item)

_____ A certificate of completion in training in a physical (practice) Aerial Rescue. ISA reserves the right to verify source of training.

_____ Other – Please contact the ISA for approval.

_____ A written verification from employer – Please complete the information below.

I hereby certify that my employee ___________________________ has completed training in aerial rescue.

By: _______________________________ Supervisor/Manager/Owner

(Please circle)

Of: _______________________________

(Company Name)

Date of completion of training: __________________________

16. Documentation of insurance is required for approval for tree worker exams held in North America

(You are required to provide the following):

1. Important information regarding insurance coverage for the CTW form

2. ISA certified tree worker release, waiver, and indemnification form

(Rest of page intentionally left blank)
Important Information Regarding Insurance Coverage for the CTW

Individuals who participate in or volunteer for an ISA Certified Tree Worker examination using ISA insurance are covered by the ISA Climbers Event Policy. This includes coverage for set-up and tear-down of events (for volunteers) as well as during the event when in the climbing zones.

In the event of an accident, the ISA insurance policy provides $50,000 (USD) in excess medical benefit coverage. This is not intended to be used as a primary medical insurance policy for those participating in the competition/workshop/examination. Any deductibles or co-pays you may incur from any other policies will not be covered under this policy. Coverage will only apply if the individual filing the claim has signed the required release form.

As the coverage limit of the Climbers Event Policy may not be adequate if a major injury were to be sustained, ISA strongly recommends that you have personal medical or health insurance, or long/short term disability insurance through your employer, or a self-insured policy to cover your medical expenses in the event of an accident. If you have insurance provided by a national health care plan, please be aware it may or may not cover any/all of your medical expenses incurred while traveling outside of your native country.

Check one below, then provide emergency contact and insurance provider/policy number.
This information is for emergency purposes and to help manage a claim if an accident were to occur.

☐ I have employer provided medical or long/short term disability insurance.
   *(Not workman’s comp, but insurance coverage through your employer)*

☐ I have personal medical or long/short term disability insurance coverage.
   *(Self-employed, or insurance not provided by your employer)*

☐ I do not have adequate personal insurance coverage or am covered by a national health care plan.
   *(I understand that if I have an accident during my covered participation in the CTW examination/ event and do not have adequate personal insurance, the ISA climbers event insurance will be limited to only $50,000 in coverage.)*

____________________  __________________________
Emergency Contact Name         Emergency Contact Phone

____________________
Insurance Provider

____________________  __________________________
Policy #          Emergency Contact Phone

____________________
Climber/Volunteer Printed Name

____________________
Climber/Volunteer Signature
ISA CERTIFIED TREE WORKER EXAMINATION/EVENT
RELEASE, WAIVER, AND INDEMNIFICATION FORM

This ISA Certified Tree Worker Release, Waiver, and Indemnification Form, hereinafter referred to as “Release”, is executed on ________________, 201__ [current date], by __________________________ [candidate name] of __________________________ [address], __________________________ [city], __________________________ [county], __________________________ [state] __________________________ [country] (“Releasor”).

In consideration of being permitted to participate in the Certified Treeworker Examination/Event conducted by INTERNATIONAL SOCIETY OF ARBORICULTURE (ISA), and the local ISA chapter/Associate Organization, __________________________, (Releasor’s name) his/her legal representatives, heirs and assigns, releases, waives and discharges INTERNATIONAL SOCIETY OF ARBORICULTURE, or the local ISA chapter/Associate Organization, its officers and members, promoters, sponsors, advertisers, owners and lessees of the premises, and each of them, its officers and employees (“Releasees”), from all liability to the Releasor, legal representatives, heirs and assigns, for any and all loss or damage, and any claim or damages resulting from the same, on account of injury to Releasor’s person or property, even injury resulting in death of the Releasor, whether caused by the negligence of Releasees or otherwise while the Releasor is competing, working, or for any purpose participating in the program.

Releasor agrees to indemnify the Releasees and each of them from any loss, liability, damage or cost incurred due to the presence of Releasor in or upon the premises, whether caused by the negligence of the Releasees or otherwise.

Releasor assumes full responsibility for the risk of bodily injury, death or property damage due to the negligence of Releasees or otherwise while in or upon the premises and while competing, officiating in, working or for any purpose participating in the program.

Releasor agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Illinois, and that if any portion of this agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Releasor has executed this Release the day and year first above written.

________________________________________
Releasor [Candidate] Printed Name

________________________________________
Releasor [Candidate] Signature

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE
(UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for said minor child, do consent and agree to the above Release of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child’s involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

________________________________________
Parent/Guardian’s Printed Name

________________________________________
EMERGENCY PHONE # __________________________

________________________________________
DATE SIGNED: __________________________

________________________________________
Parent/Guardian’s Signature
17. **Applicant Signature Required for Certification**

By signing below, you acknowledge that you have read and agreed to the terms of the Certification Agreement and Release Authorization. The information you provided in this application is accurate and complete to the best of your knowledge.

Signature_________________________ Date_________________________

ISA communicates with the local chapter or associate organization that administered your exam. We want you to know that we share your contact information and certification exam score, expiration date, and other relevant details with your local chapter so they may monitor your certification status and administer certification-related programs and services.
Certification Agreement and
Release Authorization

The International Society of Arboriculture, Inc. (ISA) is a voluntary, non-profit, professional association. The ISA Certification Program certifies qualified practitioners in the field of arboriculture who have met the professional knowledge standards established by the ISA Certification Board.

**As an applicant or certificant:**

1. I acknowledge that I have read and understand all of the terms and conditions of ISA Certification as defined in the ISA Tree Worker Aerial Lift Specialist® Application Handbook and in policies of the ISA Certification Program.

2. I agree not to release confidential examination materials or participate in fraudulent test-taking practices.

3. I understand that the ISA Certification Program is separate and distinct from all other ISA programs and services. ISA Certification is not the same as ISA membership. Unless I am also an ISA Member, I cannot use any ISA Member marks or logos.

4. I agree to provide the ISA Certification Program with complete and accurate information related to my certification application and certification, including all changes to home or business address, telephone, or e-mail within sixty (60) days of such a change.

5. I agree that the ISA Certification Department has the right to contact any person or organization as part of the review of my initial application. I authorize the release of any information requested by ISA for the purpose of reviewing my application. I agree that ISA has the right to notify appropriate organizations if my application contains false information.

6. I understand that maintaining my ISA Certification is based on my fulfillment of all certification and recertification requirements.

7. I understand that certification granted by ISA does not represent licensure, registration, or other authorization to practice or to conduct business activities for a fee or otherwise.

8. I agree to indemnify and hold ISA and its agents, employees, representatives, and successors harmless against and release them from any and all third party claims, suits, complaints, losses, or liability (claims) (including attorney fees) arising out of or related to my ISA certification, my use and/or display of ISA Certification Program credentials or designations or references to the ISA Certification Program, my professional activities and services, or my other business activities.

9. I understand that ISA certification is personal to me and may not be transferred or assigned to any other individual, organization, or entity. With respect to my use and/or display of ISA certification marks in connection with professional business activities, I agree to comply with all applicable ISA policies, including ISA Certification Program Policy and Procedure Statement No. 0016, and as may be amended in the future.

10. After being granted ISA Certification, I understand that ISA may be asked by individuals or organizations to verify my certification, including dates of certification, and I agree that such information may be released.

11. I agree that ISA may publish certain professional information concerning me on the ISA Internet site, including my employer and business contact information. I may opt out of having this information published by contacting the ISA Certification Department at isa@isa-arbor.com. I further agree that information contained in my application for ISA certification may be used for research and statistical purposes.

12. In the event that my ISA certification expires, is suspended, or is revoked, I agree to immediately stop using and/or displaying the ISA Tree Worker Aerial Lift Specialist® certification mark, credential, and any other designation indicating an affiliation with ISA Certification. I agree to comply with any additional directives of the ISA Certification Program.

13. ISA retains sole ownership of all certificates and identification cards issued to the credential holder.
ISA International Society of Arboriculture
Membership Application

ISA Membership dues are valid for 12 months from date of processing or your current expiration date. Memberships are non-transferable and non-refundable.

Name: ________________________________ Certification ID or CSID (if known): ________________________________

Member street address: ________________________________
City: __________________ State/Province: ______ Zip/Postal: ______ Country: ______

Phone: __________________ Company: __________________

E-mail: __________________
Year of birth: ____________ (required only for senior membership)

Select Type

<table>
<thead>
<tr>
<th>Price</th>
<th>Professional</th>
<th>Senior</th>
<th>Associate</th>
<th>Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>US $135</td>
<td>US $70</td>
<td>US $70</td>
<td>Free with chapter membership. (See table below for chapter membership pricing.) Or US $30 for ISA only if no local chapter.</td>
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</tbody>
</table>

Eligibility Requirements

<table>
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<tr>
<th>Price</th>
<th>Professional</th>
<th>Senior</th>
<th>Associate</th>
<th>Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anyone in good standing with ISA who wishes to help promote the professional practice of arboriculture.</td>
<td>Must be 62 or older, retired or working less than 15 hours per week and have been an ISA member for 10 cumulative years.</td>
<td>Must have a permanent residence in a province or country where English is not the official language.</td>
<td>Must be a student approved for membership in the local chapter or meet additional requirements below.</td>
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</table>

Additional Requirements/Information

<table>
<thead>
<tr>
<th>Price</th>
<th>Professional</th>
<th>Senior</th>
<th>Associate</th>
<th>Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>Must submit a letter or email stating individual meets all of the above requirements; Send email to <a href="mailto:isa@isa-arbor.com">isa@isa-arbor.com</a>.</td>
<td>None</td>
<td>If joining through ISA, include copy of current or upcoming schedule with a minimum of six credit hours in courses of study related to arboriculture.</td>
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</tbody>
</table>

Magazine Options

<table>
<thead>
<tr>
<th>Price</th>
<th>Professional</th>
<th>Senior</th>
<th>Associate</th>
<th>Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>One bimonthly print edition included; Online access to both magazines.</td>
<td>One bimonthly print edition included; Online access to both magazines.</td>
<td>Restricted to online access to both magazines.</td>
<td>Online access to both magazines.</td>
<td></td>
</tr>
</tbody>
</table>

Select magazine type:

- Arborist News (AN) $30/Free
- Arboriculture & Urban Forestry (AUF) $30/Free
- AN and AUF ($30 Extra) $135/None
- Online only (Access to online publications only) $75/$25

☐ I would like to receive a PRINT copy of the Membership Directory.
☐ I would like to receive a printed ISA Product Catalog.

Referred by ____________________________
Name: ____________________________
Member ID: ____________________________
E-mail: ____________________________

ISA CHAPTER MEMBERSHIPS (Optional) Prices subject to change. Prices shown as: Chapter Price/Student Chapter Price

The following chapter memberships are valid for twelve months from date of processing or your current expiration date.

- Atlantic (NB, NS, PE, NL) $70/$30
- Austria $110/$30
- Brazil $75/$30
- Dutch $80/$80
- Florida $30/Free
- Hong Kong $20/None
- Illinois $45/$25
- Indiana $40/$25
- Italy $175/$70
- Kentucky $40/$5
- Michigan $79/$10
- Mid-Atlantic (DC, MD, VA, WV) $50/$25
- Midwestern (KS, MO, NE, ND, OK, SD) $30/$30
- Minnesota $40/$Free
- New England (CT, ME, MA, NH, RI, VT) $35/$15
- New Jersey $35/$30
- New York $65/$15
- New Zealand $115/$20
- Ohio $45/$20
- Ontario $90/$75
- Pacific Northwest (AK, BC, ID, OR, WA) $50/$30
- Penn-Del $47/$30
- Rocky Mountain (CO, MT, NM, WY) $52/$25
- Southern (AL, AR, GA, LA, MS, NC, PR, SC, TN, VI) $30/$Free
- Spain $80/$40
- Texas $45/$30
- Utah $45/$Free
- Western $50/$25
- Wisconsin $45/$15
- ISA Student Only $30

** Add $10 for chapter-only memberships.
*** Add $20 for chapter-only memberships.

The following chapter memberships expire on December 31 annually. (31 December) Prices shown as: Chapter Price/Student Chapter Price

- Czech Republic $55/$35
- Denmark $115/$55
- Germany $135/$30
- Norway $69/$30
- New Jersey $35/$30
- New York $65/$15
- New York (AR, MB, SK-Canada) $125/$15
- Quebec $150/$40
- Sweden $70/$46

PROFESSIONAL AFFILIATION MEMBERSHIPS (Optional) Prices subject to change.

- Utility Arborist Association (UAA) $40
- Arboricultural Research and Education Academy (AREA) $25
- Society of Commercial Arboriculture (SCA) $35
- Society of Municipal Arborists (SMA) $85

Please read and complete the reverse side of this form.

Total: $
DEMOGRAPHIC INFORMATION

Please select your Consolidated Areas of Practice (Circle Primary Group)

- Commercial/Residential/Tree Company
- Municipal/Urban Forestry/Public Works/Government
- Education/Training/Research/Extension
- Landscaping/Landscape Architecture/Nursery
- Supplier/Manufacturer
- Other

Please select all the Job Functions that apply

- Consultant
- Educator
- Landscape Architect/Horticulturist
- Marketing/Sales
- Municipal/Urban Forester
- Owner/President
- Researcher
- Student/Apprentice
- Supervisory/Management
- Trainer
- Tree Worker/Climber/Technician
- Other

Gender: Male ☐  Female ☐

PAYMENT INFORMATION

Dues and payments are not deductible as charitable contributions for income tax purposes, although may be deductible as an ordinary business expense. No portion of your dues payment is used for lobbying purposes.

NOTE: Member dues payable in U.S. funds drawn on a U.S. bank. Members outside the U.S. wishing to pay in local currency should contact the chapter in your area. All membership prices subject to change without notice.

Payment type (Check one): ☐ Check    ☐ Visa    ☐ MasterCard    ☐ American Express

Check number: ____________________________

Expiration date ______/____/____

CC #: ________ __________ __________ __________

Name on card: ____________________________

Billing address same as member street address ☐

Billing address of card holder: ____________________________ Zip/Postal: _______________

Signature: ____________________________ (Only if paying by credit card)

WHAT CAN I EXPECT?

Once your ISA membership has been processed, you will receive:

1. Two emails sent to the email address you provided on this application which will include:
   - Your electronic receipt
   - A welcome email providing:
     - Your ISA username and instructions on how to obtain your ISA password which will allow you access to the ISA members-only website.
     - Details on how to update your ISA information sharing preferences as you are initially opted in to all categories. It is important that you log in to your member account to make any changes.

2. Membership packet sent to the address listed on this application containing:
   - Information on how to maximize your ISA membership benefits.
   - Special “Thank You” coupon.

Please note: By joining ISA, you agree to the Code of Ethics as found on our website and you authorize ISA to make your contact information available to chapters, associate organizations, and our four Professional Affiliates so they can share information with you about educational seminars and other arboriculture purposes.

Thank you for helping to make the world a better place, one tree at a time.

Return completed application to ISA at PO Box 3129, Champaign, IL 61826-3129 or fax to +1 217.355.9516

To join online visit www.isa-arbor.com

International Society of Arboriculture
www.isa-arbor.com  •  p. +1 217.355.9411  •  isa@isa-arbor.com