An Coimisiún um Rialáil Fóntas

**Commission for Regulation of Utilities**

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| Gas Recognition Process Application Form (International Qualifications) for Eligible Persons under S.I. 8/2017 – Registered Gas Installer (RGI) Scheme  |

**Supporting CRU documentation**

**Please read this document in conjunction with the below:**

* Guidance Notes for the Gas Recognition Process for International Qualifications for Eligible Persons under S.I. 8/2017 – RGI Scheme
* Essential Learning Outcomes / Key Understandings of the Accepted Irish Professional Qualifications for entry to the RGI Scheme. Information for Eligible Persons under S.I. 8/2017

|  |
| --- |
| **This Form is for Eligible Persons applying for the Registered Gas Installer Scheme Only** |

Your data will be processed in line with the CRU’s privacy notice (see: [Privacy notice | CRU.ie](https://www.cru.ie/privacy-notice/)). By completing this form, you consent to our sharing your personal information with third parties, as required, in order to process your application (e.g. RGI, competent authorities, regulatory bodies, previous employers or training providers).

**NOTE – this form is for Applicants who have met the criteria for ‘eligible person’ under the Directive (please see Guidance Note). If you are not an eligible person, you must apply through the process for non-eligible persons. Information on this process can be found on the CRU** [**website**](https://www.cru.ie/regulations-policy/safety/international-qualifications/)**.**

# **Checklist**

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| --- |
| You should complete all the relevant tasks on the checklist before submitting your application and attached supporting documents by email to gasrecognition@cru.ie  |

|  |  |  |
| --- | --- | --- |
| **No.** | **Task** | **Completed?** |
| **1** | I have read and understood the Guidance Notes. | [ ]  |
| **2** | I meet the requirements of ‘eligible person’ |  |
| **2** | I have read and understood the Essential Learning Outcomes/Key Understandings. | [ ]  |
| **3** | I have completed all **mandatory** sections (Section 2 and Section 3) of the application form electronically.  | [ ]  |
| **4** | I have attached a copy of identification e.g. passport, national ID card, driver’s licence (see Guidance Notes Section 3). | [ ]  |
| **5** | I have attached a copy of proof of nationality e.g. passport, national ID card, birth certificate (see Guidance Notes Section 3). | [ ]  |
| **7** | I have provided the necessary Attestation(s) of Competence and the necessary accompanying documentation  | [ ]  |
| **7** | I have attached a copy of eligibility to carry out gas works from the relevant Competent Authority / Regulatory Body, where applicable outlined in Section 3 (see Guidance Notes Section 2.3). **Optional** | [ ]  |
| **8** | I have attached a copy of all professional qualification(s) outlined in Section 4. **Optional** | [ ]  |
| **11** | I have attached copies of documents I wish to include in the Supporting Documentation tables of each section.  | [ ]  |
| **12** | All attached documentation has been translated into English , where applicable. | [ ]  |
| **13** | Your data will be processed in line with the CRU’s privacy notice (see: [Privacy notice | CRU.ie](https://www.cru.ie/privacy-notice/)). By completing this form, you consent to our sharing your personal information with third parties, as required, in order to process your application (e.g. Safe Electric or RGI, competent authorities, regulatory bodies, previous employers or training providers). | [ ]  |
| **14** | I will pay the professional qualifications application fee in full (€250) in line with RGI’s payment process (see Guidance Notes Section 1.7). | [ ]  |

# **Personal Details**

|  |
| --- |
| **Please complete all parts of this section**  |

|  |
| --- |
| **Eligibility*** Are you an eligible person? If not, you must apply through the process for non-eligible persons. See Guidance Notes Section 2.2.
* Do you have a relevant professional qualification? See Guidance Notes Section 2.4
 |

|  |  |
| --- | --- |
| Full Name: |  |
| Previous Names, if any |  |
| Date of Birth: |  |
| Nationality: |  |
| Country of citizenship: |  |
| Are you an eligible person? (See Guidance Notes Section 2.2): | Yes [ ]  No[ ] If No, you should apply through the process for non-eligible persons. |
| Please provide further details if you an eligible person and not a national of an EEA[[1]](#footnote-1) Member State (see Guidance Notes Section 2.2): |  |
| Home AddressAddress 1: Address 2:Address 3:Postal code: Country: |  |
| Direct Phone / Mobile Number: |  |
| **Note:** By providing my phone/mobile number I consent to being contacted by phone |
| Personal Email: |  |
| **Note:** By providing my personal email address I consent to being contacted by email |

## **2.1 Relevant Supporting Documentation**

You must attach copies of the following:

* **Proof of identification** (passport, national photo ID card, photo driving licence, etc.).
* **Proof of nationality** (passport, national photo ID card, birth certificate, etc.).
* See Section 3 of the Guidance Notes for further information on non-EEA eligible persons.

If the documentation is not in English, please supply a copy of the original and a version translated into English.

Please list the relevant documentation attached in the table below.

|  |  |  |
| --- | --- | --- |
| Detail of Item Submitted | In English? | Translated? |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |

|  |
| --- |
| **Expand the above rows as necessary** |

# **Proof of Qualifications and Work Experience**

|  |
| --- |
| You must provide the following as proof of professional qualifications:* Evidence of qualifications or Attestation of Competence[[2]](#footnote-2) **if your home Member State regulates the profession;** or
* Evidence that you pursued the activity on a full time basis for one year or for an equivalent overall duration on a part-time basis during the previous 10 years in another Member State which does not regulate that profession AND evidence of qualifications or one of more Attestation(s) of competence if the **Member State does not regulate the profession.** The requirement of one year professional experience does not apply if the education is regulated in the home Member State. The requirement of one year professional experience can be waived if the education is regulated in the home Member State.
 |

## 3.1 Is the profession of Gas Installer regulated in the country in which your qualification(s) were obtained/recognised i.e. RGI or equivalent?

## See Section 2.3 of the Guidance Notes.

Yes [ ]  No [ ]

 If Yes, continue to 3.2

 If No, continue to 3.3

3.2 If submitting a qualification, please include details below: Note you may copy and paste this table for additional qualifications.

|  |
| --- |
| **Professional Qualification 1** |
| Country of Qualification |  |
| Title of Qualification |  | English |
|  | Original Language |
| Name of Awarding Body / Institution |  | English |
|  | Original Language |
| Address 1: Address 2:Address 3:Postal Code:Country: |  |
| Email / Website Address  |  |
| Start Date (dd/mm/yyyy) |  |
| Completion Date (dd/mm/yyyy) |  |
| Study | Full-time [ ]  Part-time [ ]  |
| List of subjects /modules |  |

OR

Please set out one or more Attestation(s) of Competence. Please include details in the table below. Note you may copy and paste this table for additional qualifications.

|  |
| --- |
| **Attestation of Competence 1** |
|  |

3.3 Please provide evidence that you pursued the activity on a full time basis for one year or for an equivalent overall duration on a part-time basis during the previous 10 years in another Member State which does not regulate that profession. Details should be provided below and the necessary documentation attached to this application. **Note:** The requirement of one year professional experience does not apply if the education is regulated in the home Member State. The requirement of one year professional experience can be waived if the education is regulated in the home Member State.

|  |
| --- |
| **Evidence of Professional Experience** |
|  |

 AND

Evidence of qualifications or one of more Attestation(s) of competence

|  |
| --- |
| **Professional Qualification 1** |
| Country of Qualification |  |
| Title of Qualification |  | English |
|  | Original Language |
| Name of Awarding Body / Institution |  | English |
|  | Original Language |
| Address 1: Address 2:Address 3:Postal Code:Country: |  |
| Email / Website Address  |  |
| Start Date (dd/mm/yyyy) |  |
| Completion Date (dd/mm/yyyy) |  |
| Study | Full-time [ ]  Part-time [ ]  |
| List of subjects /modules |  |

# **Proof you are Qualified to Carry Out Gas Works in the Country of your Qualification(s) or have the necessary requirements to join the RGI scheme:**

## 4.1 Are you qualified, or were you previously qualified, to carry out gas works in the country in which your qualification(s) were obtained/recognised?

## See to Section 2.3 of the Guidance Notes.

 Yes [ ]  No [ ]

 If Yes, continue to 4.2

 If No, continue to 3.3

## 4.2 Is the profession of Gas Installer regulated in the country in which your qualification(s) were obtained/recognised i.e. RGI or equivalent?

## See Section 2.3 of the Guidance Notes.

Yes [ ]  No [ ]

 If Yes, continue to 4.3

If No, you are not considered an eligible person under the Directive and you will need to apply through the Process for non-eligible persons.

## 4.3 Please provide the attestations of competence. It is optional to provide details of the Competent Authority / Regulatory Body that can confirm your qualification entitles you to practise in your profession in the country where it was obtained.

**If gas works are not regulated in the country where your qualifications are obtained/recognised please skip to Section 5. See Section 2.3 of the Guidance Notes.**

|  |
| --- |
| **Note:** If the Member State where your qualification was obtained/recognised regulates gas works (see Appendix 1 of the Guidance Notes), you may wish to provide proof that you are qualified to carry out gas works in that Member State. See Guidance Notes. |

|  |  |  |
| --- | --- | --- |
| Name of Competent Authority / Regulatory Body: |  | English |
|  | Original Language |
| Address 1: Address 2:Address 3:Postal code: Country: |  |
| Email address: |  |
| Phone Number (include country area code): |  |
| **Please list the domestic gas works you are registered to undertake.** **If your registration is general rather than in categories, please state ‘all’.**Note: this is for registration categories only – qualifications / training should be given in Section 4. |
| Are you currently or were you previously registered with this Competent Authority / Regulatory Body? If Yes, please complete the following. If No, skip to 3.4. | Yes [ ]  | No [ ]  |
| \Your registration / licence number: |  |
| Date(s) of registration: | From: | To: |
| Professional title under which you are/were registered: |  | English |
| Original Language |
| Have you ever been sanctioned / disciplined while you were registered? If Yes, please provide details: | Yes [ ]  No [ ]  |
| Yes: |  |

## **4.4 Relevant Supporting Documentation**

You may, if you wish to do so, attach copies of the following:

* If the country where your qualification was obtained/recognised **regulates gas works** (see Appendix 1 of the Guidance Notes), you may wish to **provide proof that you are/were qualified** to carry out gas works in that country (letter of registration or ID card, confirmation from the Competent Authority / Regulatory Body, etc.)
* See Section 2.3 of the guidance notes for further information on non-EEA eligible persons.

If the documentation is not in English, the applicant please supply a copy of the original and a version translated into English,

Please list the relevant documentation attached in the table below.

|  |  |  |
| --- | --- | --- |
| Detail of Item Submitted | In English? | Translated? |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |

|  |
| --- |
| **Expand the above rows as necessary** |

# **Qualification(s) for Recognition**

|  |
| --- |
| Use this section to provide details of your relevant professional qualification(s), if you wish to do so.The subjects and learning outcomes of your relevant qualification(s) will be compiled and compared against the Essential Learning Outcomes set out in the accompanying document. The Panel will decide if the profession you are qualified for is the same as the profession of RGI in Ireland. **If not, the Panel will consider whether compensation measures or Partial Access may be appropriate.****The CRU considers the following qualifications relevant to the RGI scheme:** * Gas
* Plumbing
* Gas fitter or Pipefitting
* Refrigeration
* Electrical qualification(s).
* **Note:** Applicants with electrical qualification will need an additional relevant qualification(s) and experience related to gas; Applicants holding only an electrical craft certificate/relevant qualification(s) will be assessed to demonstrate electrical competence with the Safe Electric scheme.

  and/or* Qualification(s) which have qualified you to practise as a Gas Installer in the country within the EEA where it was obtained/recognised.

Two tables are provided below:* **Type A**: longer courses (1 or more years) such as apprenticeship qualifications
* **Type B**: shorter (less than 1 year) relevant qualifications.

**Note:** You must copy and insert a new table (Type A or Type B) for each additional relevant qualification you wish to include. See Guidance Notes for more information. |

## **5.1 Type A Qualification(s) (1 or more years)**

|  |
| --- |
| **Note:** If your qualification was less than one year long use Type B table below. |

|  |
| --- |
| **Relevant Professional Qualification No. 1 (Type A: 1 or more years)** |
| Country of Qualification |  |
| Title of Qualification |  | English |
|  | Original Language |
| Name of Awarding Body / Institution |  | English |
|  | Original Language |
| Address 1: Address 2:Address 3:Postal Code:Country: |  |
| Email / Website Address  |  |
| Start Date (dd/mm/yyyy) |  |
| Completion Date (dd/mm/yyyy) |  |
| Study | Full-time [ ]  Part-time [ ]  |
| List of subjects /modules |  |

|  |
| --- |
| **Add additional relevant Type A qualification(s) below by copying and inserting the above table, as necessary.** |

## **5.2 Type B Qualification(s) (shorter than 1 year)**

|  |
| --- |
| **Note:** If your qualification was more than one year long use Type A table above. |

|  |
| --- |
| **Relevant Professional Qualification No. 2 (Type B: shorter than 1 year)** |
| Country of Qualification |  |
| Title of Qualification |  | English |
|  | Original Language |
| Name of Awarding Body / Institution |  | English |
|  | Original Language |
| Address 1: Address 2:Address 3:Postal Code:Country: |  |
| Email / Website Address  |  |
| Start Date (dd/mm/yyyy) |  |
| Completion Date (dd/mm/yyyy) |  |
| Study | Full-time [ ]  Part-time [ ]  |
| List of subjects /modules |  |

|  |
| --- |
| **Add additional relevant Type B qualification(s) below by copying and inserting the above table, as necessary.** |

## **5.3 Relevant Supporting Documentation**

For each of your professional qualifications (Type A and Type B) Please attach copies of the following:

* **Certificate of qualification**
* **Official transcripts**

If the documentation is not in English, please supply a copy of the original **and** a version translated into English.

Please list the relevant documentation attached in the table below.

|  |  |  |
| --- | --- | --- |
| Detail of Item Submitted | In English? | Translated? |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |

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| --- |
| **Expand the above rows as necessary** |

# **Professional Experience**

|  |
| --- |
| Use this section to show you have the level of work experience to become registered in the scheme, should you wish to do so. Please outline a summary of your relevant work experience relating to gas (and plumbing, fitter/pipefitting, refrigeration, and/or electrical, as applicable). You should demonstrate that you have the appropriate level of experience to become a Registered Gas Installer in the RGI scheme. List your experience starting with the most recent. It will be assumed that you are not working in your profession for any period not accounted for. Three tables are provided below. **Note:** You must copy and insert a new table for each additional relevant work experience you wish to include. In addition to the completion of the tables provided in this section, applicants may submit a curriculum vitae (CV), providing a full outline of their work experience. |

|  |
| --- |
| **Relevant Work Experience 1 – Current/Most Recent Employment** |
| Employer  |  |
| Address 1:Address 2:Address 3:Postal code:Country: |  |
| Phone number |  |
| Email address |  |
| Job title |  |
| Start Date (mm/yyyy) |  | End Date (mm/yyyy) |  |
| Period in years / months |  |
| Main duties: |  |

|  |
| --- |
| **Expand the above rows as necessary** |

|  |
| --- |
| **Relevant Work Experience 2 – Second Most Recent Employment \*** |
| Employer  |  |
| Address 1:Address 2:Address 3:Postal code:Country: |  |
| Phone number |  |
| Email address |  |
| Job title |  |
| Start Date (mm/yyyy) |  | Start Date (mm/yyyy) |  |
| Period in years / months |  |
| Main duties: |  |

|  |
| --- |
| **Expand the above rows as necessary** |

|  |
| --- |
| **Relevant Work Experience 3 – Third Most Recent Employment \*** |
| Employer  |  |
| Address 1:Address 2:Address 3:Postal code:Country: |  |
| Phone number |  |
| Email address |  |
| Job title |  |
| Start Date (mm/yyyy) |  | Start Date (mm/yyyy) |  |
| Period in years / months |  |
| Main duties: |  |

|  |
| --- |
| **Expand the above rows as necessary** |

|  |
| --- |
| **If you wish, you can add additional relevant work experience(s) below by copying and inserting the above table, as necessary.** |

## **6.1 Relevant Supporting Documentation**

You may attach copies of the following if you wish to do so:

* **employment reference** written on headed paper/email by a named person and dated, including contact details alone will not be accepted

If the documentation is not in English, please supply a copy of the original **and** a version translated into English.

Please list the relevant documentation attached in the table below.

|  |  |  |
| --- | --- | --- |
| Detail of item submitted | In English? | Translated? |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |
|  | [ ]  | [ ]  |

|  |
| --- |
| **Expand the above rows as necessary** |

**Notes on Work Experience.**

\* Multiple Work Experience details are not mandatory.

1. You may also include other supporting documentation such as certificates of completed works, testimonies from customers, etc. if applicable.
2. A current curriculum vitae (CV) can be included with the supporting documentation. This can be helpful to the Panel to see the chronology of work experience.

The above information on professional experience, are optional. They are suggested in order to ensure your application is not delayed and to avoid or limit compensatory measures.

# **Learning Outcomes/Key Understandings**

|  |
| --- |
| Use this section to provide examples from your professional experience and qualifications, to show how you have met each relevant Essential Learning Outcome / Key Understanding, should you wish to do so. The Panel will assess your qualifications against these Learning Outcomes/Key Understandings to determine if you are qualified to undertake the same profession as gas installer in Ireland. * **All applicants** should complete **Table 7.1** detailing **gas works** experience and qualification(s)

You may then review which – if any – of the accepted qualification(s) you hold. If you have: * **Plumbing** qualification(s) - complete **Table 7.2**
* **Fitter/Pipefitting** qualification(s) - complete **Table 7.3**
* **Refrigeration** qualification(s) - complete **Table 7.4**.

**Note: Electrical Qualifications –** Applicants with electrical qualification(s) will need additional relevant qualification(s) and/or experience related to gas. As stated in the decision paper, if an applicant holds a relevant electrical qualification(s) only, he/she will need to demonstrate electrical competence via the electrical recognition process.You do not need to complete a section of this form if you do not have experience in the field or are unable to set out your experience against the Essential Learning Outcomes/Key Understanding.  |

## **7.1 The Domestic Gas Safety (DGS) Award**

|  |
| --- |
| **Please complete all parts of Section 6.1** For each Essential Learning Outcome, please provide examples from your work and training experience. Expand text boxes as required.If you do not have experience as a Gas Installer[[3]](#footnote-3) or a particular Essential Learning Outcome or are unsure how your experience relates to the Learning Outcomes/Key Understandings below, you may leave the field blank.  |

|  |  |
| --- | --- |
| **No.**  | **Gas Safety - Essential Learning Outcomes /Key Understandings** |
| **1** | Give examples of your knowledge of legislation / regulations and Standards in Ireland and elsewhere appropriate to domestic gas works, regarding the following:

|  |
| --- |
| * Building regulations
 |

|  |
| --- |
| * Gas standards
 |

|  |
| --- |
| * Health and safety
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **2** | Give examples of your practical work experience of the following:

|  |
| --- |
| * Installation process for domestic systems
 |

|  |
| --- |
| * Open flue and Decorative Fuel Effect gas fires
 |

|  |
| --- |
| * Safety assessment on a domestic gas installation
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **3** | Provide examples of your experience with the following types of domestic gas works

|  |
| --- |
| * Incomplete combustion causes and remedies
 |

|  |
| --- |
| * Maintenance and repair
 |

|  |
| --- |
| * Decommissioning gas fires
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **4** | For liquid petroleum gas (LPG), give examples of your work experience in the following areas:

|  |
| --- |
| * Storage and siting cylinders and bulk tanks
 |

|  |
| --- |
| * Appliances
 |

|  |
| --- |
| * Regulators
 |

|  |
| --- |
| * Pipework
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **5** | Outline times in your employment where you have carried out the following electrical works for domestic gas appliances

|  |
| --- |
| * Safe electrical isolation
 |

|  |
| --- |
| * Electrical minor works [controls, wiring]
 |

|  |
| --- |
| * CO alarms [Type A, Type B]
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **6** | For Leisure Accommodation Vehicles (LAVs) give examples of your work experience in the following areas:

|  |
| --- |
| * EN 1949
 |

|  |
| --- |
| * Safety checks and procedures
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |

## **7.2 Plumbing Qualifications**

|  |
| --- |
| For applicants with Plumbing qualification(s) only. If you **do not** have a Plumbing qualification(s) you **DO NOT** need to complete the table below. Expand text boxes as required.If you do not have experience as a Gas Installer[[4]](#footnote-4) or a particular Essential Learning Outcome or are unsure how your experience relates to the Learning Outcomes/Key Understandings below, you may leave the field blank.  |

|  |  |
| --- | --- |
| **No.**  | **Plumbing - Essential Learning Outcomes/Key Understandings** |
| **1** | Describe a central heating installation - gas or other fuel type - that you installed. Give detailed specific information on the following:

|  |
| --- |
| * Regulation and Legislation
 |

|  |
| --- |
| * Design and planning details including type of system pipe type and sizing, heat emitter sizing and jointing methods/tools used
 |

|  |
| --- |
| * Safety features of installation
 |

|  |
| --- |
| * Commissioning and handing over procedures
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **2** | Describe in your own words a hot and cold water system that you installed. Give detailed specific information on the following:

|  |
| --- |
| * Regulation and Legislation
 |

|  |
| --- |
| * Design and planning details including type of installation, water quality, pipe sizing, expansion and storage
 |

|  |
| --- |
| * Safety features
 |

|  |
| --- |
| * Commissioning and handing over procedures
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **3** | Describe in your own words three separate and varying situations/jobs in heating and cold/hot water systems, considering the following:

|  |
| --- |
| * Fault and diagnosis
 |

|  |
| --- |
| * Maintenance procedures / programmes
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |

## **7.3 Fitter or Pipefitting Qualifications**

|  |
| --- |
| For applicants with Fitter/Pipefitting qualification(s) only. If you **do not** have a Fitter or Pipefitting qualification(s) you DO **NOT** need to complete the table below.If you do not have experience as a Gas Installer[[5]](#footnote-5) or a particular Essential Learning Outcome or are unsure how your experience relates to the Learning Outcomes/Key Understandings below, you may leave the field blank.  |

|  |  |
| --- | --- |
| **No.**  | **Fitter/Pipefitting - Essential Learning Outcomes /Key Understandings** |
| **1** | Describe in your own words your experience in thermal processes, with regard to the following:

|  |
| --- |
| * Various types of welding
 |

|  |
| --- |
| * Cutting
 |

|  |
| --- |
| * Safety features
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **2** | Describe in your own words your knowledge of pipe processes. Give detailed specific information on the following:

|  |
| --- |
| * Materials, components and fittings
 |

|  |
| --- |
| * Preparation
 |

|  |
| --- |
| * Jointing, bending and testing
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **3** | Describe in your own words your experience in pipe installation, with regard to the following:

|  |
| --- |
| * Rigging and assembly
 |

|  |
| --- |
| * Components and ancillary piping equipment
 |

|  |
| --- |
| * Services and bracketing
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **4** | Describe in your own words varying situations/jobs in pipefitting installations, considering the following:

|  |
| --- |
| * Hand and power tools
 |

|  |
| --- |
| * Safety features and best practise
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |

## **7.4 Refrigeration Qualifications**

|  |
| --- |
| For applicants with Refrigeration qualification(s) only. If you **do not** have a Refrigeration qualification(s) you **DO NOT** need to complete the table below.If you do not have experience as a Gas Installer[[6]](#footnote-6) or a particular Essential Learning Outcome or are unsure how your experience relates to the Learning Outcomes/Key Understandings below, you may leave the field blank.  |

|  |  |
| --- | --- |
| **No.**  | **Refrigeration – Essential Learning Outcomes /Key Understandings** |
| **1** | Please describe in your own words your knowledge of refrigeration, considering the following:

|  |
| --- |
| * Pipework, brazing and tubing
 |

|  |
| --- |
| * Testing procedures – Pressure and leaking
 |

|  |
| --- |
| * Safety procedures and commissioning
 |

|  |
| --- |
| * Any other details that would highlight your experience
 |

 |
| **2** | Describe in your own words your knowledge of electrical installations relating to refrigeration and air conditioning, with regard to the following

|  |
| --- |
| * Earth/bonding and testing
 |

|  |
| --- |
| * Cables, controls and wiring components
 |

|  |
| --- |
| * Solenoid valves and thermostats
 |

|  |
| --- |
| * Transformers
 |

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| --- |
| * Safety procedures and commissioning
 |

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| --- |
| * Any other details that would highlight your experience
 |

 |
| **3** | Describe in your own words three separate and varying situations/jobs in refrigeration and air conditioning, considering the following

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| --- |
| * Fault and diagnosis
 |

|  |
| --- |
| * Maintenance procedures / programmes
 |

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| --- |
| * Any other details that would highlight your experience
 |

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| **4** | Describe in your own words varying situations/jobs in refrigeration installations, considering the following:.

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| --- |
| * Hand and power tools
 |

|  |
| --- |
| * Safety features and best practise
 |

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| --- |
| * Any other details that would highlight your experience
 |

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| Once you have completed the application form, please confirm the **checklist on page two** before submitting the application form and supporting documents as attachments to: gasrecognition@cru.ie  |

1. European Economic Area (EEA) - The 27 Member States of the European Union and Iceland, Norway and Liechtenstein. It is noted that specific rules also apply for Switzerland. [↑](#footnote-ref-1)
2. An attestation of competence can be a specific examination without prior training, or full-time pursuit of the profession in a Member State for three consecutive years or for an equivalent duration on a part-time basis during the previous 10 years. [↑](#footnote-ref-2)
3. Also referred to a “gas technician” in some countries. [↑](#footnote-ref-3)
4. Also referred to a “gas technician” in some countries. [↑](#footnote-ref-4)
5. Also referred to a “gas technician” in some countries. [↑](#footnote-ref-5)
6. Also referred to a “gas technician” in some countries. [↑](#footnote-ref-6)