

---

**ACOPNE**

*Academy of Coastal, Ocean, Port & Navigation Engineers*

**APPLICATION TO BECOME A DIPLOMATE**

***(PLEASE INCLUDE A CV / RESUME WITH THIS APPLICATION)***

**ACADEMY OF COASTAL, OCEAN, PORT  
& NAVIGATION ENGINEERS**

## **Diplomate; Coastal, Ocean, Port & Navigation Certification Application**

*(Please complete this application form and return to ACOPNE along with your Resume/C.V. and payment of \$300 for ASCE members and \$400 for non-members for the first certification for the initial year. Each additional certificate will cost a fee of \$100)*

**DIPLOMATE CERTIFICATION (please indicate which Diplomate Certification you are applying for:**

- Diplomate, Coastal Engineering (D.CE)**
- Diplomate, Ocean Engineering (D.OE)**
- Diplomate, Port Engineering (D.PE)**
- Diplomate, Navigation Engineering (D.NE)**

**Where did you hear about ACOPNE and the certification program?**

- Website
- Email from ACOPNE or ASCE
- Friend or colleague
- Advertisement (Smart Brief, newsletter, or magazine ad)
- Visited exhibit booth at a conference
- Attended a ceremony
- Other: \_\_\_\_\_

**Personal Information:**

Name:  
Designations:  
Position:  
Organization:  
Address:  
Phone:  
E-Mail Address:  
Supervisor:

**Education: (Please list name of school, city, state/province, country, and month/year of degree)**

Bachelors:

Masters:

Doctoral:

**Experience (backdating at least 12 Years – List Title, Organization, Dates):**

The details supplied to support the application experience should provide the Project owner, project details, project location, \$ value, role of the applicant, how it relates to the Diplomate area applied for, and how long the applicant worked on the project.

- 1.
- 2.
- 3.

**Honors/Awards:**

- 1.
- 2.
- 3.

**Publications:**

- 1.
- 2.
- 3.
- 4.
- 5.

**P.E. Licensure Information OR Foreign Equivalent Registration or Licensure:**

State(s) and expiration date(s):

License number(s):

If non-U.S., Country(s):

**Have any of your current or past P.E. licenses ever been in violation, suspended, revoked, surrendered, cited or had any other actions, voluntary or enforced, similar to those previously listed, against your P.E. license? (If yes, please describe and attach additional pages as necessary)**

Yes

No

### **Mastery of Body of Knowledge Criteria**

**You must have developed mastery in at least ONE of the following four elements of the Body of Knowledge related to coastal, ocean, port or navigation engineering. Please address the element(s) to the best of your knowledge. If more space is needed, you may submit separately as attachments with this application.**

**1 - Specialized area related to civil engineering.** Professional Engineer, through a combination of education, experience, and corresponding accomplishments, has demonstrated a high level of skill in a specialized area of Coastal, Ocean, Port, or Navigation engineering. ACOPNE encourages certification in area(s) of coastal, ocean, port, or navigation engineering specialization.

**2 - Project management, construction, and asset management.** Professional Engineer, through education, experience, and corresponding accomplishments, has demonstrated a high level of skill in the management of complex coastal, ocean, port, or navigation engineering projects.

**3 - Business, public policy and public administration.** Professional Engineer, through education, experience, and corresponding accomplishments, has demonstrated a high level of skill in the evaluation of business plans, public policy recommendations, and a system of public administration in support of coastal, ocean, port, or navigation projects.

**4 - Leadership principles and attitudes.** Professional Engineer, through education, experience, and accomplishments, has demonstrated a high level of skill in providing leadership with respect to complex coastal ocean port & navigation engineering projects. ACOPE encourages participation and leadership in professional societies, board of registrations, and national review panels, etc.

## **PROFESSIONAL ETHICS**

Academy of Coastal Ocean Port & Navigation Engineers Code of Ethics\*

### **Fundamental Principles**

Engineers uphold and advance the integrity, honor and dignity of the engineering profession by:

1. using their knowledge and skill for the enhancement of human welfare and the environment;
2. being honest and impartial and serving with fidelity the public, their employers and clients;
3. striving to increase the competence and prestige of the engineering profession; and
4. supporting the professional and technical societies of their disciplines.

### **Fundamental Canons**

1. Engineers shall hold paramount the safety, health and welfare of the public and shall strive to comply with the principles of sustainable development in the performance of their professional duties.
2. Engineers shall perform services only in areas of their competence.
3. Engineers shall issue public statements only in an objective and truthful manner.
4. Engineers shall act in professional matters for each employer or client as faithful agents or trustees, and shall avoid conflicts of interest.
5. Engineers shall build their professional reputation on the merit of their services and shall not compete unfairly with others.
6. Engineers shall act in such a manner as to uphold and enhance the honor, integrity, and dignity of the engineering profession.
7. Engineers shall continue their professional development throughout their careers, and shall provide opportunities for the professional development of those engineers under their supervision.

**I attest that I have read, understand and accept the Academy of Coastal Ocean Port & Navigation Engineers Code of Ethics and agree to adhere to it. I further understand and agree that violation of the Academy of Coastal Ocean Port & Navigation Engineers Code of Ethics is grounds for expulsion from the Academy and revocation of the Diplomate credential.**

---

---

Signature

Date

\* *Standard language used by Civil Engineering Certification, Inc. (CEC) and its Academies.*

### **ORAL EXAMINATION CONSIDERATIONS**

ACOPNE requires all qualified applicants to take the Diplomate oral examination unless specifically waived and will work to address all reasonable disability related accommodations disclosed with this application.

Please check one of the two options:

1. \_\_\_ I DO NOT have a disability (as defined by the Americans with Disabilities Act or other applicable state or local law/regulation) that requires reasonable accommodation during the oral assessment.
2. \_\_\_ I HAVE a disability (as defined by the Americans with Disabilities Act or other applicable state or local law/regulation) that requires reasonable accommodation during the oral assessment.

If you checked item 2 and indicated that you have (YES) a disability that requires reasonable accommodation during the oral assessment, please provide:

(1) documentation on your disability (please attach letter or other disability documentation from qualified expert such as treating physician)

(2) a brief explanation of how this disability impacts your ability to take the oral assessment,

---

---

---

---

and

(3) your requested reasonable accommodation.

---

---

---

The ACOPNE retains the right to verify the claimed disability and provide reasonable accommodation of its choosing to enable equal access to the Diplomate oral assessment.

The ACOPNE attempts to provide oral assessments in reasonably convenient locations (usually within the state or region of a state where the applicant resides). However, this may not always be possible. By signing this page, the applicant agrees to travel (at his/her cost) to the closest available oral assessment site provided by the Academy, and attests that no reasonable accommodations are required beyond those outlined above.



**DIPLOMATE, COASTAL, OCEAN, PORT & NAVIGATION ENGINEER  
APPLICATION CONFIDENTIAL REFERENCE FORM**

You have been listed by an applicant as a reference for the Diplomat, Coastal, Ocean, Port & Navigation Engineer credential of the ACOPNE ([www.acopne.org](http://www.acopne.org)).

Please complete this entire form. You may print out the form and print, or **type in the required information** and **save as your document**. You may attach additional sheets to this form if needed. Please return the form and any attached documents directly to ACOPNE by mail, fax, or e-mail at your earliest convenience.

Mail: **ACOPNE**  
1801 Alexander Bell Drive  
Reston, VA 20191  
USA  
Fax: (877) 488-9035  
E-Mail: [info@acopne.org](mailto:info@acopne.org)

Applicant Name: \_\_\_\_\_

Reference Name: \_\_\_\_\_ Date: \_\_\_\_\_

Reference Title: \_\_\_\_\_

Reference Business: \_\_\_\_\_

Reference Address: \_\_\_\_\_

\_\_\_\_\_

Reference E-mail contact point: \_\_\_\_\_

Signature (required on mail or fax copies): \_\_\_\_\_

1) Please list one U.S. state/jurisdiction in which you are licensed to practice engineering. If outside of U.S., please list the country(s) you are registered/chartered.

State: \_\_\_\_\_ License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

2) How long have you known the applicant and in what capacity?

3) How would you compare the applicant in professional competence and promise with others you have known at this stage of their career?

4) In what area(s) of coastal, ocean, navigation, or port engineering (may be more than one category) do you consider the applicant to be an expert in (research, design, project management, etc.)? Please explain:

5) Give at least one example of a decision or situation where the applicant exercised exceptional professional judgment and/or behavior:

6) Do you recommend the applicant for specialty certification within coastal, ocean, navigation, or port engineering as a Diplomate Engineer (to review the full criteria please visit [www.acopne.org](http://www.acopne.org))?

Yes: \_\_\_\_\_

No: \_\_\_\_\_

## Checklist:

- **Submit Completed Application (including payment)**
- **Attach CV/Resume**
- **Submit One of the Following:**
  1. **Copy of Diploma**
  2. **Copy of Transcripts**
  3. **List Post Graduate Courses**
- **Email Self Photo (for ceremony) to [info@acopne.org](mailto:info@acopne.org)**
- **Send Reference Form to 3 P.E.s (no more than two from any one organization)**

Each of the three references should be standalone, not one reference endorsed by the three referrers.

**ACOPNE PAYMENT INFORMATION**

ASCE Member# \_\_\_\_\_

I am an ASCE member and have enclosed a check or money order in the amount of \$300 drawn on a U.S. bank and made payable to the "ACOPNE".

OR

Please charge \$300 on my credit card:

-----  
-----

I am not an ASCE member and have enclosed a check or money order in the amount of \$400 drawn on a U.S. bank and made payable to the "ACOPNE".

OR

Please charge \$400 on my credit card:

Visa

MC

AMEX

Credit card # \_\_\_\_\_

Exp. Date \_\_\_\_\_

Name \_\_\_\_\_

Signature\* \_\_\_\_\_

(\*not required if sent via email)

Cardholder Address: \_\_\_\_\_

\_\_\_\_\_

Please submit form and payment to:

**ACOPNE**  
**1801 Alexander Bell Drive**  
**Reston, VA 20191**  
**USA**  
**Fax: (877) 488-9035**  
**Email: [info@acopne.org](mailto:info@acopne.org)**

If you are **paying by credit card**, you may fax the form to (703) 295-6415 or Email to [info@acopne.org](mailto:info@acopne.org).