## **BPI Building Analyst I Training**

Presented by Kansas Building Science Institute

## AGENDA

## Day One 8:30 a.m.

- Introductions
- Overview of BPI certification process and standards
- Technician 1 Auditor Standards
- Health and safety requirements

#### LUNCH

- Building science/house as a system
- Principles of energy
- Whole House Weatherization Video
- Energy and the building shell
- Building geometry

### Day Two 8:30 a.m.

• Evaluating insulation, windows & doors

#### LUNCH

- Building Air leakage testing
- Duct leakage Testing
- Air barrier testing
- House of Pressure demonstration
- Building airflow standard

## Day Three 8:30 a.m.

- Identifying and evaluating heating systems
- Residential Gas Heating Systems Video
- BPI combustion safety test procedures
  - Chimney draft
  - Worst-case CAZ depressurization
  - Vented appliances
  - o Ovens

#### **LUNCH**

- In-field demonstration and practice with blower door
- In-field demonstration and practice with Duct Blaster
- In-field demonstration and practice with air barrier and zonal pressure testing
- In-field demonstration of combustion safety testing
- Field data gathering and recording procedure
- Building Analyst I Written Exam (90 minutes)

## Days Four, Five and Six

Performance testing will be scheduled with an available proctor on a first-come, first-served basis. This process takes approximately three hours and is conducted one-on-one with a BPI proctor. Please confirm your time for the field test before making travel arrangements.



# BPI Building Analyst Training and Testing Registration Form Only one registration per form. For additional registrations, please copy this form.

Name	Job Title
Company/Agency	
Address	
City	State Zip
Work Phone	Work Fax
Home or Cell Phone (for emergency contact only)	
e-mail address	
o man a	44.000
Credit card billing address in	f different than above.
Address	
City	State Zip
City	State Zip
May 15-17, 2006: Three-day course and May 18-20, 2006 Performance exam (Please indicate pre May 18 AM May 18 PM May 19 AM May 19 PM May 20 AM	\$500
Please indicate method of payment:  Check enclosed payable to KBSI  Send invoice*  Charge to:VISAMCAmexDisc.	
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Cardholder's Printed Name as it appears on card	
Cardholder's Signature	
Card Number	Expiration Date

FAX: 785-537-2440

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