

Renewal Application for Class 3 and 4 Wastewater Operators

THIS OFFICE WILL NOT MAINTAIN RECORDS FOR YOU THIS IS YOUR RESPONSIBILITY!

Please complete this form and submit **required copies of CEH certificates within 30 days of expiration of certificate!**

Your Name: _____ **Check one:** I am applying to renew my Class III ____ or Class IV ____ certificate

Home Mailing Address: _____ Home Phone Number: _____ Fax Number: _____

_____ Zip Code: _____ Email Address (if applicable) _____

Certification Number _____ Wastewater System Where Employed _____ Work Phone Number _____

List courses and supporting documentation you have taken during this renewal period. Incomplete information will be RETURNED TO YOU!

| <u>Course Name/Title</u> | <u>Course Sponsor</u> | <u>Length of Class (Hours)</u> | <u>Dates attended</u> |
|--------------------------|-----------------------|--------------------------------|-----------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Signature of Applicant Date _____

APPROVED FOR RENEWAL BY:

(Bureau for Pubic Health Reviewer)

- Please send the following documents with this form to:
- Some Proof of Attendance such as:
 - * Attendance rosters
 - * Copies of any certificates issued
 - * Copies of college/vocational transcripts
 - Copy of Course/Seminar/Training Agenda or Syllabus, i.e.
 - * Specifics on what was taught or what you learned i.e., Chlorine safety, First Aid/CPR, Pump Repair and Maintenance, Water Microbiology, Water Chemistry, etc. and -----

WVBPH - EED
Training & Certification Section
Capitol & Washington Streets
1 Davis Square, Suite 200
Charleston, WV 25301
(304) 558-6988 (304) 558-4322 (fax)

- Hours or Time Awarded by Sponsoring Agency such as:
 - * Classroom hours, CEU's/CEH's, Semester or Quarter hours, or other designator or training time