



**RE-TEST ONLY**  
**Application for Technical Certification**  
 7677 Oakport Street, Suite 600  
 Oakland, CA 94621  
 phone: (510) 382-7800 fax(510) 382-7810 fax  
 www.mi-wea.org

Select the date range in which you would like to take your test (check only one):	We must receive your application by (Postmarked):
<input type="checkbox"/> October 1 through December 31	August 31
<input type="checkbox"/> January 1 through March 31	November 30
<input type="checkbox"/> April 1 through June 30	February 28
<input type="checkbox"/> July 1 through September 30	May 31

**I. IMPORTANT TESTING INFORMATION TO APPLICANTS**

*(Applicants are responsible to know the testing policies and procedures. Read and fill out this entire form to avoid a delay in your application)*

1. Please send photocopies of all supporting documents for your testing eligibility to complete your application.
2. Applications must be typed or printed neatly in ink. Illegible or incomplete applications can result in a delay for approval or denial to sit for the exam.
3. Make your check payable to CWEA-TCP. Mail this form, a check, money order or credit card payment in the amount of the application fee, and all supporting documents to CWEA TCP, 7677 Oakport St. #600, Oakland, CA 94621. We will mail an application acknowledgement letter 2 weeks after your application is received by CWEA.
4. Seats at test site locations are on first-come, first-served availability.
5. Under no circumstances are candidates allowed to sit for the same exam twice in the same window.
6. Upon passing the certification tests, certificate holders are responsible to pay an annual renewal fee and submit 12 contact hours every two years. CWEA Membership status must be current at time of certificate renewal or a non-member premium will apply.

**II. TECHNICAL CERTIFICATION APPLICATION INFORMATION** (Please print clearly and check only one)

VOCATION	GRADE LEVEL			
	1	2	3	4
Biosolids Land Application Management				
Collection System Maintenance				
Environmental Compliance (Industrial Waste) Inspector				
Laboratory Analysis				
Operator, Industrial Waste Treatment Plant				
Plant Maintenance				
Mechanical Technologist				
Electrical/Instrumentation				
<b>Circle fee enclosed:</b>				
<b>Member Fee (applies to current members only)</b>	<b>\$130</b>	<b>\$145</b>	<b>\$160</b>	<b>\$175</b>
<b>Non-Association member Fee</b>	<b>\$178</b>	<b>\$193</b>	<b>\$208</b>	<b>\$223</b>
<input type="checkbox"/> <b>**Check here if you would like to apply your non-member fee to a one year association membership with 7WEA. For more information contact <a href="http://www.mi-wea.org">www.mi-wea.org</a></b>				

I am a current \*CWEA/WEF member. Member number: \_\_\_\_\_ \*Member must in good standing.

NAME \_\_\_\_\_  
 (Last) (First) (Middle)

AGENCY \_\_\_\_\_

PRIMARY ADDRESS\* \_\_\_\_\_  
 \*Will be used for all CWEA mailing (Street) (Apt/Ste)

Home Address  
 Work Address  
 (City) (State) (Zip +4)

WORK PHONE \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
 (Include area code)

E-MAIL (optional): \_\_\_\_\_ (to receive certification updates)

OFFICE USE ONLY
<b>CWEA Staff Review:</b> Reviewer: _____ Recommended: YES <input type="checkbox"/> NO <input type="checkbox"/> Date: _____
<b>Subject Matter Expert Review:</b> Reviewer: _____ Recommended: YES <input type="checkbox"/> NO <input type="checkbox"/> Date: _____

Name of Applicant \_\_\_\_\_

III. DATE OF LAST TEST: \_\_\_\_\_  
*Please enter the date of the last exam you took (it must be no more than 1 year)*

**IV. REASONABLE ACCOMMODATIONS FOR THOSE WITH DISABILITIES**

Do you have a physical or psychological disability that may affect your ability to successfully complete the exam?  
 YES  NO

If yes, please state the nature of your disability: \_\_\_\_\_  
Reasonable accommodations will be provided for those individuals who provide CWEA with a physician's certificate, or the equivalent. *Please attach documentations with this application.*

**V. CODE OF ETHICS**

All California Water Environment Association certificate holders and applicants are expected to meet the following standards of professional conduct and ethics:

1. To protect public health, themselves, their co-workers, property, and the environment by performing the Essential Duties of the CWEA certified vocation safely and effectively, and complying with all applicable federal, state and local regulations.
2. To represent themselves truthfully and honestly throughout the entire certification process.
3. To adhere to all test site rules and make no attempt to complete the test dishonestly or to assist any other person in doing so.
4. To refrain from activities that may jeopardize the integrity of the Technical Certification Program.

**VI. SIGNATURE OF APPLICANT**

I, the undersigned, certify that I am the above named applicant; that all statements made and information contained in the above application are true and correct to the best of my knowledge and belief; that I understand that any omissions or misrepresentations may result in ineligibility of the examination being applied for or revocation of any certificate granted. I have read and understand the CWEA Technical Certification Program Code of Ethics. I also consent to a thorough investigation of my employment records and other qualifications in related activities for the purpose of verification of my qualifications for the certificate for which I have applied. I understand that the exam to which applied is confidential and protected by law. I am prohibited by law from disclosing, publishing, reproducing or transmitting the exam content in any form, verbal, written or electronic. I have read and understand the policies listed on this application.

DATE: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

**SEND YOUR COMPLETED APPLICATION, ALONG WITH THE APPROPRIATE FEE, DIRECTLY TO:**

**Michigan Water Environment Association**  
c/o CWEA TCP  
7677 Oakport Street, Suite 600  
Oakland, CA 94621  
(510) 382-7800 • (510) 382-7810 fax

**Payment Information:**

Agency Check # \_\_\_\_\_  Money Order  Personal Check # \_\_\_\_\_ Total Amount Authorized to Charge: \$ \_\_\_\_\_

Choose one:  Mastercard  American Express

Visa  Discover Card Number: \_\_\_\_\_ Exp. Date \_\_\_ / \_\_\_ / \_\_\_

Total Amount Authorized to Charge: \$ \_\_\_\_\_

Card Holder Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Type:  Agency  Personal

# Technical Certification Program Qualifying Combinations

GRADE 1		
Qualifying Combination	EDUCATION/CERTIFICATIONS	EXPERIENCE
	NONE REQUIRED TO TAKE TEST	NONE REQUIRED TO TAKE TEST
GRADE 2		
Qualifying Combination	EDUCATION/CERTIFICATIONS	EXPERIENCE
A	NONE	4 full-time years in vocation
B	Hold Grade 1 certificate in vocation for 1 year	2 full-time years in vocation
C	Associate's, or higher, degree in a related field	2 full-time years in vocation
D	Bachelor's, or higher, degree in a related field	1 full-time year in vocation
GRADE 3		
Qualifying Combination	EDUCATION/CERTIFICATIONS	EXPERIENCE
A	NONE	6 full-time years in vocation
B	Hold Grade 2 certificate in vocation for 2 years	4 full-time years in vocation
C	Associate's, or higher, degree in a related field	4 full-time years in vocation
D	Bachelor's, or higher, degree in a related field	3 full-time years in vocation
GRADE 4		
Qualifying Combination	EDUCATION/CERTIFICATIONS	EXPERIENCE
A	NONE	8 full-time years in vocation with 1 year supervising others
B	Hold Grade 3 certificate in vocation for 2 years	6 full-time years in vocation with 1 year supervising others
C	Associate's, or higher, degree in a related field	6 full-time years in vocation with 1 year supervising others
D	Bachelor's, or higher, degree in a related field	5 full-time years in vocation with 1 year supervising others

## Technical Certification Program Local Section Chairs

For help with study preparation for the TCP exam, an active local chair person can help you get connected with the right resources.

### Local Section \*LS

Colorado River Basin (CORBS)  
Central San Joaquin (CSJS)  
Desert and Mountain (DAMS)  
Golden Empire (GES)  
Hawaii (HIK)  
Los Angeles Basin (LABS)  
Michigan (MICH)  
Monterey Bay (MB)  
North Coast (NC)  
Northern San Joaquin (NSJ)  
Northern Sacramento Valley (NSVR)  
(NSVY)  
Redwood Empire (RED)  
Sacramento (SAC)  
San Diego (SD)  
Santa Ana River Basin  
Santa Clara Valley (SCV)  
San Francisco Bay (SFB)  
Sierra (SRA)  
Tri-Counties

### Chair

Javier Villarreal  
Larry Tolby  
Robert Renison  
Robert Cole  
John Nishimura  
Kris Flaig  
Jeanette Best  
Larry Brown  
Jeff Underwood  
Heather Grove  
  
Stuart Zanni  
Stan Gryczko  
Barry Pomeroy  
Mike Neri  
Soma Bhadra  
Ed Peterson  
Joanna De Sa  
Angelino Santos  
Ben Malone  
Jim Langley

### Phone:

760-345-1600  
709-577-2875  
909-338-3245  
661-862-8985  
808-944-1821  
310-648-5489  
989-759-1631  
831-624-1248X284  
707-443-4558  
209-333-6749  
  
530-224-6051  
530-822-7698  
  
916-496-6377  
760-815-8697  
949-837-7050x104  
408-730-7261  
510-276-4700  
530-587-2525  
805-583-6443

### Email:

[javier.villarreal@cvwd.org](mailto:javier.villarreal@cvwd.org)  
[lgtnci@msn.com](mailto:lgtnci@msn.com)  
[qjf55@yahoo.com](mailto:qjf55@yahoo.com)  
[bcole@wmdksa.com](mailto:bcole@wmdksa.com)  
[jnishimura@hawaii.rr.com](mailto:jnishimura@hawaii.rr.com)  
[kris.flraig@lacity.org](mailto:kris.flraig@lacity.org)  
[jbtest@saginaw-mi.com](mailto:jbtest@saginaw-mi.com)  
[brown@cawd.org](mailto:brown@cawd.org)  
[junderwood@ci.eureka.ca.gov](mailto:junderwood@ci.eureka.ca.gov)  
[hgrove@ci.manteca.ca.us](mailto:hgrove@ci.manteca.ca.us)  
  
[szanni@ci.redding.ca.us](mailto:szanni@ci.redding.ca.us)  
[sgryczko@yubacity.net](mailto:sgryczko@yubacity.net)  
[bpomeroy@vsfcd.com](mailto:bpomeroy@vsfcd.com)  
[mneri@folsom.ca.us](mailto:mneri@folsom.ca.us)  
[sbhadra@dudek.com](mailto:sbhadra@dudek.com)  
[epeterson@etwd.com](mailto:epeterson@etwd.com)  
[JDeSa@ci.sunnyvale.ca.us](mailto:JDeSa@ci.sunnyvale.ca.us)  
[acs@santosac.com](mailto:acs@santosac.com)  
[bmalone@ttsa.net](mailto:bmalone@ttsa.net)  
[jlangley@simivalley.org](mailto:jlangley@simivalley.org)

\*Contact your Local Section chairs to get connected to the right study groups/sessions and resources in your area.

Visit CWEA's web site for more information

For information about test content outlines, study references, study sessions, policies, candidate handbooks, and applications, please visit CWEA's website at [www.cwea.org/cert](http://www.cwea.org/cert)

# CWEA Technical Certification Program Policy Description



California  
Water  
Environment  
Association

## Application Deadlines and Testing Windows

Testing Window	Application Deadline
January 5 through March 31	November 30
April 1 through June 30	February 28
July 1 through September 30	May 31
October 1 through December 31	August 31

**\*An Administrative fee may apply if you request to make changes to your test application.**

### **Test Rescheduling Instructions (within your test window):**

To reschedule an existing test appointment within the same testing window, call Pearson VUE directly at least one business day before your existing test appointment. Failing to notify Pearson VUE at least one business day before the existing test appointment will cause you to lose all test fees. You will also be required to pay an additional fee to reschedule within the testing window. Call the CWEA office if you must reschedule (transfer) your existing test appointment in a different testing window.

### **Test Transferring Fee (outside of your test window):**

Rescheduling an existing test appointment in a different testing window is called "transferring." Only two transfers are allowed for each candidate per year. You do not need to pay a fee to transfer to the next testing window. If you transfer your test appointment a second time, or if you transfer your appointment to a testing window other than the next one, you will pay an additional [administrative fee \(\\$40\)](#). You will lose your application fee if you do not notify CWEA to transfer your test application within 5 business days after your testing window ends.

### **Retest Instructions:**

Candidates who need to take their tests again must submit an application and the appropriate fees. All candidates must skip at least one testing window before retesting. To be eligible to use the [Retest Application](#) candidates must schedule the new test within the same year as the original test. If you will retest more than a year after your original test date, you will need to fill out the regular [test application](#). Submit the appropriate form to CWEA along with the appropriate [testing fees](#) and wait to receive your approval letter. You will then be able to schedule your test

### **Test Cancellation Instructions:**

To cancel your test application or appointment, you must notify CWEA in writing, with a signed letter; you may email or mail (a phone call will not be sufficient). Your written request must be received at the CWEA office **before your test window begins** if you wish to avoid losing all the fees you have paid. If you have a scheduled test appointment with Pearson VUE, you must contact them directly to cancel your appointment in addition to notifying the CWEA office. Refunds less an administrative fee (\$40) will be mailed within four weeks. There are no exceptions to this policy.

### **DO NOT LOSE YOUR FEES:**

The following will cause you to lose your test fees:

- Failing to appear at your scheduled test appointment;
- Arriving at the testing site without a current, government-issued photo ID;
- Arriving at the testing site 15 minutes after your scheduled test appointment.

If you missed your test appointment, arrived 15 minutes (or more) late, or did not have proper identification, you will need to pay a [test delivery fee](#). This fee is required if you would like a new test appointment authorization code.

### **Test Result Notification:**

Immediately after your test, you will see your score on the screen. An **Unofficial Score Report** will be given to you before you leave the test site. To request a copy from Pearson VUE, please call 888-749-3881. They will mail or email a copy to you. **Official test results** are mailed no more than four weeks after the test date. All results are confidential and will only be released to the certificate candidate. *No results will be given over the phone, or by fax or email*

### **Test Site Admission:**

Certificate candidates are required to show at least one valid government issued photo identification (State driver's license, ID, or passport). You do not need to bring your eligibility letter to the test site. For test security, candidates are only allowed to bring an approved calculator into the test site.

### **Calculator policy:**

An onscreen calculator (basic and scientific) is available in all CWEA tests. Candidates may bring a handheld calculator as long as it is from the CWEA approved calculator list. See models below.

- Casio:* All fx-115 models; any Casio calculator with fx-115 in its model is allowed.
- Texas Instruments:* All TI-30x and TI-36x models are allowed.
- Sharp:* EL models *except* EL-W516B and EL-W535B are allowed.

### **Americans with Disabilities Act:**

In compliance with the Americans with Disabilities Act, reasonable accommodations will be provided for those individuals who provide CWEA with a physician's certificate (or its equivalent) documenting a physical or psychological disability that may affect the individual's ability to successfully complete the certification examination. Written requests for reasonable accommodations must be submitted with the test application. Language barriers and lack of familiarity with computers are not covered under [ADA laws](#).

All Policies are subject to change.

