

III. EDUCATION AND TRAINING

A. College Graduate? YES NO Degree: _____ Major: _____

Date Granted: _____ Name and Location of School: _____

ATTACH COPIES OF COLLEGE TRANSCRIPTS OR CERTIFICATES OF COMPLETION AS PROOF

B. List course work you have completed that is relevant to your vocation:

1. TITLE OF COURSE: _____

SCHOOL: _____ DATE COMPLETED: _____ UNITS COMPLETED: _____

2. TITLE OF COURSE: _____

SCHOOL: _____ DATE COMPLETED: _____ UNITS COMPLETED: _____

3. TITLE OF COURSE: _____

SCHOOL: _____ DATE COMPLETED: _____ UNITS COMPLETED: _____

ATTACH ADDITIONAL SHEETS IF NECESSARY

IV. QUALIFYING EXPERIENCE HISTORY

Present detailed work experience related to the water quality industry and to the vocation for which you are applying. List your present or most recent work experience first. Be sure to adequately describe your job duties.

A. CURRENT OR MOST RECENT

EMPLOYER: _____ Phone: _____
(include area code)

Address: _____

Job Title: _____ Date Started: _____ Date Left: _____

Supervisor's Name: _____ Supervisor's Phone Number: _____

Job Duties: _____

What portion of your time did these duties take? _____% Total Years: _____

EMPLOYER VERIFICATION:

I certify that the information stated above is true and correct to the best of my knowledge.

(Employer/Supervisor's Name--Please Print) (Title) (Date)

Supervisor's Signature: _____

B. NEXT PREVIOUS EMPLOYER: _____ Phone: _____

(include area code)

Address: _____

Job Title: _____ Date Started: _____ Date Left: _____

Supervisor's Name: _____ Supervisor's Phone Number: _____

Job Duties: _____

What portion of your time did these duties take? _____% Total Years: _____

C. NEXT PREVIOUS EMPLOYER: _____ Phone: _____
 (include area code)
 Address: _____
 Job Title: _____ Date Started: _____ Date Left: _____
 Supervisor's Name: _____ Supervisor's Phone Number: _____
 Job Duties: _____

What portion of your time did these duties take? _____% Total Years: _____
 D. NEXT PREVIOUS EMPLOYER: _____ Phone: _____
 (include area code)
 Address: _____
 Job Title: _____ Date Started: _____ Date Left: _____
 Supervisor's Name: _____ Supervisor's Phone Number: _____
 Job Duties: _____

What portion of your time did these duties take? _____% Total Years: _____

E. Total Qualifying Years of Experience: _____

F. Do you currently have valid CWEA certification in this vocation? YES NO
 If yes, give certificate number, grade and date originally issued: _____

Attach a copy of your certificate and current renewal card.

**USE ADDITIONAL SHEETS TO LIST ADDITIONAL EDUCATION, TRAINING AND EXPERIENCE
 DO NOT FORGET TO ATTACH TRANSCRIPTS IF YOU ARE USING EDUCATIONAL CREDITS**

V. SPECIAL 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: _____
 Special accommodations will be provided for those individuals who provide CWEA with a physician's certificate, or the equivalent, documenting the disability.

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 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.

DATE: _____ Signature of Applicant: _____

APPLICATION DEADLINE	TEST DATE
April 30, 2002	July 27, 2002
October 31, 2002	January 26, 2003
April 30, 2003	July 26, 2003
October 31, 2003	January 24, 2004

If you do not already have a Candidate Handbook describing the subject matter covered in the Biosolids Land Application Management certification test you may obtain one by contacting CWEA at (510) 382-7800, or by visiting CWEA's web site at **WWW.CWEA.ORG**.

QUALIFICATIONS FOR BIOSOLIDS LAND APPLICATION MANAGEMENT CERTIFICATION

To qualify for certification candidates must:

- A. Complete the Biosolids Land Application Management Application for Technical Certification, pay the appropriate application fee, **AND**
- B. Have one year of experience related to the science and technology of land application management, **or** equivalent education including 16 hours of specific training, **AND**
- C. Pass the written examination for Biosolids Land Application Management certification.

IMPORTANT TECHNICAL CERTIFICATION PROGRAM POLICIES

Exam Postponement and Cancellation Instructions:

To postpone your application you must submit a signed written request (a letter stating that you wish to postpone), with a \$35 administrative fee. The written request **and** payment must be received at the CWEA office no later than six (6) days after the scheduled test date. You may only postpone your application twice. There are no exceptions to this policy.

Exam Result Notification:

Exam results are mailed to certificate candidates no later than 6 weeks after the examination date. No results are given over the phone. All results are confidential and are only released to the certificate candidate.

Issue of Certificate:

Certificates will be issued to all candidates who pass the examination. Certificates are mailed about two to three weeks after result notifications have been mailed.

Renewal of Certification:

All certificates must be renewed annually. The first renewal is due one year from the last day of the month in which the certification exam was held. Certificate renewals less than one year past due are subject to the renewal fee plus a penalty fee of 100% of the renewal fee. Certificates more than one year past due are not renewable. Re-testing is required to reinstate certificates more than one year past due. Renewal notices are mailed to certificate holders two months before the due date. Certificate holders must notify CWEA of any address changes. **IT IS THE RESPONSIBILITY OF THE CERTIFICATE HOLDER TO ENSURE THAT HIS OR HER CERTIFICATE(S) REMAIN VALID**

Americans with Disabilities Act:

In compliance with the Americans with Disabilities Act, special 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 special accommodations must be made no later than 2 weeks before the examination date.

Instructions For Choosing A Local Section

1. Choose the Local Section in which you would like to take your exam. The Local Sections are listed below.
2. Write in the name or abbreviation for the Local Section you have chosen on page one of the application.

Notes:

- The exact location of the site you choose will be mailed to you after you have been approved to sit for the examination. This usually occurs about one to two months after the application deadline.
- If you need to know the exact location of your exam site contact your Local Section Chair listed below.
- If you do not choose a site, one will be chosen for you.
- Site changes are permitted only up to 3 weeks before the exam date.
- The Tri-Counties, Northern Sacramento Valley, and Santa Ana River Basin Sections offer two sites (see the list below).

Where To Send Your Completed Application:

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

CWEA TCP
7677 Oakport St., STE 525
Oakland, CA 94621-1935

Technical Certification Program Local Section Chairs

Local Section	Site Location*	LS Chair	Phone
Alaska	ALASKA	CWEA	510-382-7800
Colorado River Basin (CORBS)	Palm Springs, CA	Javier Villarreal	760-345-1600
Central San Joaquin (CSJS)	Kingsburg, CA	Robert Currie	559-896-4420
Desert and Mountain (DAMS)	Crestline, CA	Robert Renison	909-338-3245
Golden Empire (GES)	Bakersfield, CA	TBA	
Los Angeles Basin (LABS)	Los Angeles, CA	Kris Flaig	310-648-5489
Michigan (MICH)	Lansing, MI	Jeanette Best	517-483-4405
Monterey Bay (MB)	Marina, CA	Larry Brown	831-624-1249X284
North Coast (NC)	Eureka, CA	Mickey Hulstrom	707-443-4558
Northern San Joaquin (NSJ)	Modesto, CA	Heather Grove	209-333-6749
Northern Sacramento Valley (NSVR)	Redding, CA	Steve Craig	530-224-6063
(NSVW)	Woodland, CA		
Redwood Empire (RED)	Petaluma, CA	John Parmenter	707-644-8949 X241
Sacramento (SAC)	Elk Grove, CA	Ken Holmes	916-421-6793
San Diego (SD)	San Diego, CA	Steve Taylor	858-614-5543
Santa Ana River Basin (SARP)	Perris, CA	Thomas Blanda	714-593-7641
(SARF)	Fountain Valley, CA		
Santa Clara Valley (SCV)	San Jose, CA	Joanna De Sa	408-277-8415
San Francisco Bay (SFB)	San Leandro, CA	John Williams	510-276-4700
Sierra (SRA)	Truckee, CA	Rocco Mohr	530-587-3804
Tri-Counties		Richard Delgadillo	805-875-8394
(TRIO)	Oxnard, CA		
(TRIL)	San Luis Obispo/Lompoc, CA		

*Test Sites are subject to change. Visit CWEA's web site at www.cwea.org for the latest information about test sites and maps. Click on Technical Certification.

