

Florida Water & Pollution Control Operators Association A Non-Profit Association Serving Water & Wastewater Professionals in the State of Florida

VOLUNTARY CERTIFICATION APPLICATION FORM RECLAIMED WATER DISTRIBUTION

LOCATION OF SCHOOL: _ ADDRESS:	HOOL:		_				
* THIS ORIGINAL APPLICA * THIS APPLICATION WILL DOCUMENTATION IS NO * FORM MUST BE SIGNED * REGISTRATION MUST BI SCHOOL.	ATION MUST BE RETURN L BE RETURNED IF THE (T ATTACHED. BY YOU AND YOUR SUPE	ORIGINAL IS NOT PR ERVISOR.	OVIDED AND A	LL NECESSARY			
NAME:	Last 4 digits of SS#:						
MAILING ADDRESS:	(House Number)	(Street/Ave)		(Apt #)			
(City)	(County)		(State)	(Zip)			
Work Phone: ()		Fax: ()					
Employer:		_ Job Title:					
Email Address:	License # (for CEU):						
PLACE AND "X" NEXT TO							
Level C: course & exam	1 day course & exam*	exam only	CEU (DW	/DS/WW02014124, 3.0 CEU)		
Level B: course & exam	1 day course & exam*	exam only	CEU (DW	/DS/WW02014123, 3.0 CEU)		
Level A: course & exam	1 day course & exam*	exam only	CEU (DW	/DS/WW02014138, 3.0 CEU)		
* ABBREVIATED COURSE CERTIFICATION - ATTAC			FW&PCOA W	VATER DISTRIBUTIO	N		
NO ACTUAL EXPERIENCE	OR QUALIFICATIONS AF	RE REQUIRED FOR CI	EU.				
EXAMS REQUIRE "HANI DISTRIBUTION SYSTEM O RETURNED. Examples of space services, etc. Use an additional List all Employers where Reclarations."	PERATIONS. IF SPECIF becific job duties: Install recl sheet of paper if necessary.	FIC JOB DUTIES ARE laimed water mains, make	NOT LISTED, A te taps, repair leak	APPLICATION WILL B cs, install/repair meters an	E		
Employer:)			
Dates of Employment: Specific Job Duties:							
Employer:)			
_					_		

LIST CURRENT HIGH HELD:	EST WATER/R	ECLAIMED	WATER/WASTEWA	TER/STORMWATER CERTIFICATION
		Class:	Certificate #	Date Issued:
				Date Issued:
Certification Type:				Date Issued:
required). If attending the required), material will be may be purchased from Dr Phone (916) 278-6142; Fax CERTIFICATION EXAMS	e abbreviated co provided. The te Kenneth Kerri, (916) 278-5959. S: The intermediat The board will is	ourse and example of the control of	am (proof of FW&PC ater Distribution Syste or Programs, CSU – Sac basic C level exams will PCOA Certification Cer	og their own textbook (most recent edition of the Completion of th
have accumulate completed the FV CLASS B: (A) Must have a On" experience. Must pass the B CLASS A: (A) Must have a On" experience. Must pass the A	east 18 years of age d at least 1 year (2 W&PCOA Class C n FW&PCOA Cla (C) Must furnish e level written exam n FW&PCOA Clas (C) Must furnish e level written exam	e. (B) Must fur 2,080 hours) o Technology tr ass C Certificate vidence of hav ss B Certificate vidence of hav entation that is	f actual "Hands-On" expaining course. (E) Mustion. (B) Must have accurding completed the FW& on. (B) Must have accurding completed the FW& in agreement with the A	a high school diploma or equivalent. (C) Moderience. (D) Must furnish evidence of having the pass the C level written exam. Immulated 3 years (6,240 hrs.) of actual "Hand PCOA Class B Technology training course. (Immulated 5 years (10,400 hrs.) of actual "Hand PCOA Class A Technology training course. (Immulated 5 years (10,400 hrs.) of actual "Hand PCOA Class A Technology training course. (Immericans with Disabilities Act (ADA) must disabilities
AND ACKNOWLED APPLICANT SIGNAT THE SUSPENSION O EITHER PARTY EXESUPERVISOR'S VER completed form and Crecommend that the approximation is approximately approximately approximation of the secommend of the secomme	GED AS BE TURES WILL R REVOCATIONS THE TERMINATION: INTERNATION: INTER	ING TRUI RESULT II ION OF AN S DOCUMI By signing t to the best	E AND CORRECT AN ETHICS HEAT AND ALL EXISENT. This application form of my knowledge	DON THIS APPLICATION FOR THE SUPERVISOR AN ARING THAT COULD RESULT IS TING CERTIFICATION HELD BE A SECOND HE
Board. Supervisor's Signature	:			Title:
Printed Name:				Phone:
APPLICANT'S VERI contained in this applic				form, I certify that the information
Applicant's Signature:				Date:
FEES: Course and Exam Exam Only	\$355 \$100	Abbrevia	ated Course	\$155

<u>MAIL:</u> Fees, payable to FW&PCOA Training, with original application (with all documents attached) to FW&PCOA Training Coordinator, 4401 S Hopkins Ave., Ste 108, Titusville FL 32780-6679. Phone (321) 383-9690, Fax (321) 383-9691, fwpcoa@gmail.com; www.fwpcoa.org.