

APPLICATION INSTRUCTIONS
ALBERTA ENVIRONMENT
WATER & WASTEWATER
OPERATOR CERTIFICATION PROGRAM
Application Instructions

General

This form should be used for all **Level I** Certification applications until **December 31, 2008** only. It is to be used for applications for "Municipal" or "Public" certification under the Alberta Environment Water and Wastewater Operators' Certification Program. It is intended for first-time applications.

To receive full credit for all education and experience, the form **MUST** be filled out completely.

Incomplete forms **WILL** be returned.

Section A - Personal Information

This information is necessary if personal files are to be complete. Please fill it out completely. Type or print clearly.

Section B - Education

The minimum education requirement for certification is Grade 12 or GED. A photocopy of the diploma or a transcript indicating that a diploma was granted must accompany the application.

Alberta Learning will provide High School transcripts if a request is sent to:

Transcript Office, Alberta Learning
2nd Floor, 44 Capital Boulevard
10044 - 108 Street
Edmonton, Alberta T5J 5E6
Phone: (780) 427-5732
For toll-free access within Alberta, first dial 310-0000.

The transcript **MUST** show that a diploma was granted.

Section C – Mandatory Entry Level Training

A copy of your Mandatory Entry Level Training Course Completion Certificate, or the Level I Certification Preparation Course Completion Certificate or the NAIT Water and Wastewater Technician Program Certificate must be attached.
Applications received without verification will be returned.

Section D - Request Category

Please indicate category of certification for which you are applying using the appropriate sheet for each category (i.e. water treatment, water distribution, wastewater treatment, wastewater collection). If qualified at Level I, an operator has the option to write the exams in any or all of the four categories. Due to the length of the exam this is **not recommended**.

Exams can be rewritten after a six-month waiting period. Candidates must rewrite within one year. Other restrictions may apply regarding rewrites. Please see the Alberta Water and Wastewater Operators' Certification Guidelines for further information (<http://www3.gov.ab.ca/env/water/dwq/certification.html>)

If an operator is progressing through the levels (i.e., I to II to III etc.) a minimum of 1 year between exams is required.

If a specific exam date and location is desired, please indicate it in the space provided. If this space is left blank, a schedule will be sent when the application is approved.

Section E - Operating Experience

This section **MUST** be completed with details. A separate page for each category (i.e. water treatment, water distribution, wastewater treatment, and wastewater collection) is required. Applications that are not complete or are not signed by a supervisor **WILL** be returned.

Section F - Applicant's Declaration

The application **MUST** be signed and dated by the **APPLICANT**

Section G - Verification by Supervisor

The application must be signed by the applicant's Supervisor.

Section H - Other

This space is for any other information the applicant wishes to provide. Additional sheets may be attached to the application.

NOTE: Calculators may be used while writing certification exams. Also, a conversion/formula sheet will be provided.

Faxed applications **WILL** be accepted. They may be faxed to (780) 427-5204. All applications must be **received on OR before** the deadline date to be considered. **NO EXCEPTIONS.**

The collection of personal information on this form is being managed in accordance with the *Alberta Freedom of Information & Protection of Privacy Act*. The authority for collection of personal information pertaining to the certification of water and wastewater operators is regulated in Alberta by the Environmental Protection and Enhancement (EPEA) Act (sections: 80, 81, 82, 83, and 85, Potable Water Regulations (Sections 2, 3, 14, & 15) and Wastewater and Storm Drainage (Ministerial) Regulation (Sections 2, 3, and 6). The personal information collected on this form will only be used in the administration of the Alberta Water & Wastewater Operator Certification Program. The collection of transcripts and course certificates will only be used by the department for verification purposes. Your personal information will not be shared with any other agency, government departments, businesses or individuals without your specific written consent or unless required to do so by law. Please be aware that Certificates of Qualification that are created by Alberta Environment in the administration of the Environmental Protection & Enhancement Act (EPEA) will be disclosed to the public, on request, as authorized under section 35(1)(b)(ii) of EPEA. If you want further details on how your personal information is collected and used, please contact the Drinking Water Branch at (780) 644-4959.

APPLICANT WORKSHEET/CHECKLIST

Level I Certification

A. Education

High School Diploma, General Educational Development (GED) transcript or High School Equivalency Diploma required. Copy <u>must</u> be attached.	<input type="checkbox"/>
Approved applicable entry-level training (minimum 1.2 CEUs) _____ # CEUs Copy of your Mandatory Entry Level Training Course Completion Certificate, or the Level I Certification Preparation Course Completion Certificate or the NAIT Water and Wastewater Technician Program Certificate <u>must</u> be attached.	<input type="checkbox"/>

B. Experience

Minimum 1-year current operating experience in a municipal facility. _____ # years	<input type="checkbox"/>
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Note 1: If you are applying for certification in more than one of the categories (water treatment, water distribution, wastewater treatment, wastewater collection) you must have worked in **EACH** category during the same year. It is possible to qualify for more than one category during the same year.

Note 2: Please indicate on your application, your **OPERATIONS** duties in **EACH** of the categories you wish to have considered.

**Please read the application form carefully.
Complete all sections.
Obtain the necessary signatures and provide all necessary attachments.**

**OPERATOR CERTIFICATION APPLICATION – PART A
GENERAL INFORMATION
2006/07/08
Alberta Environment
Water and Wastewater Operator Certification Program**

Type or Print Clearly All Information

SECTION A – PERSONAL INFORMATION

Name: _____ Position Title: _____

Mailing Address: _____

Postal Code

Email Address: _____

Are you Currently Certified With the **Alberta Water and Wastewater Operator Certification Program**? Yes:___ No:___ Cert. #:_____

Current Employer: _____ Facility: _____

Work Address: _____


Postal Code

Work Phone Number: (_____) _____ FAX Number: (_____) _____
Area code Area code

Supervisor's Name: _____ Supervisors Title: _____

SECTION B - EDUCATION – The minimum requirement for certification is high school completion or equivalent. Attach a copy of verification of high school/GED completion). 

Applications will NOT be accepted without Education Verification.

SECTION C – MANDATORY ENTRY LEVEL TRAINING – A copy of your Mandatory Entry Level Training Course Completion Certificate, or the Level I Certification Preparation Course Completion Certificate or the NAIT Water and Wastewater Technician Program Certificate **must be attached**. 

Experience Summary Page(s) must accompany this application 

Deadlines

Applications must be received **ON OR BEFORE:**
January 20, April 10, and September 20 – Each Year
NO EXCEPTIONS

Drinking Water Branch
Environmental Assurance
Alberta Environment

Mailing Address: 8th Floor, 9820 – 106 Street
Edmonton, AB, T5K 2J6
FAX: (780) 427-5204

This application is only good until December 31, 2008

OPERATOR CERTIFICATION APPLICATION – PART B – WATER TREATMENT

SECTION D – Application for Water Treatment Level I

Exam Location and Date Requested: _____

SECTION E – EXPERIENCE

SUMMARY OF WATER TREATMENT OPERATING EXPERIENCE:

Date Current Position (**Employment**) Commenced: Day _____ Month _____ Year _____
For previous positions attach additional pages with appropriate information

Duties: Provide a description of operation duties and level of responsibility in water treatment operations. Also attach a copy of your current position description.

Estimated hours per day spent in water treatment operations: _____

SECTION F – DECLARATION OF APPLICANT

I _____ confirm that the information on this application is true and accurate to the best of my knowledge.
Printed Name

Signature of Applicant: _____ Date: _____

SECTION G – VERIFICATION BY SUPERVISOR (*All applications MUST be verified*)

I _____ confirm that the above information concerning water treatment operations
Supervisor Printed Name and Title
experience is true and accurate to the best of my knowledge.

Supervisor's Signature: _____ Supervisors Comments: _____

SECTION H – OTHER – Please indicate how you feel you meet the requirements. This space may also be used for any other comments you may have.

This form must be used for all applications submitted until December 31, 2008. After December 31, 2008, this form cannot be used and new forms will be available.

OPERATOR CERTIFICATION APPLICATION – PART B – WATER DISTRIBUTION

SECTION D – Application for Water Distribution Level I

Exam Location and Date Requested: _____

SECTION E – EXPERIENCE

SUMMARY OF WATER DISTRIBUTION OPERATING EXPERIENCE:

Date Current Position (**Employment**) Commenced: Day _____ Month _____ Year _____
For previous positions attach additional pages with appropriate information

Duties: Provide a description of operation duties and level of responsibility in water distribution operations. Also attach a copy of your current position description.

Estimated hours per day spent in water distribution operations: _____

SECTION F – DECLARATION OF APPLICANT

I _____ confirm that the information on this application is true and accurate to the best of my knowledge.
Printed Name

Signature of Applicant: _____ Date: _____

SECTION G – VERIFICATION BY SUPERVISOR (*All applications MUST be verified*)

I _____ confirm that the above information concerning water distribution operations
Supervisor Printed Name and Title
experience and is true and accurate to the best of my knowledge.

Supervisor's Signature: _____ Supervisors Comments: _____

SECTION H – OTHER –. Please indicate how you feel you meet the requirements. This space may also be used for any other comments you may have.

This form must be used for all applications submitted until December 31, 2008. After December 31, 2008, this form cannot be used and new forms will be available.

OPERATOR CERTIFICATION APPLICATION – PART B – WASTEWATER TREATMENT

SECTION D – Application for Wastewater Treatment Level I

Exam Location and Date Requested: _____

SECTION E – EXPERIENCE

SUMMARY OF WASTEWATER TREATMENT OPERATING EXPERIENCE:

Date Current Position (**Employment**) Commenced: Day _____ Month _____ Year _____
For previous positions attach additional pages with appropriate information

Duties: Provide a description of operation duties and level of responsibility in wastewater treatment operations. Also attach a copy of your current position description.

Estimated hours per day spent in wastewater treatment operations: _____

SECTION F – DECLARATION OF APPLICANT

I _____ confirm that the information on this application is true and accurate to the best of my knowledge.
Printed Name

Signature of Applicant: _____ Date: _____

SECTION G – VERIFICATION BY SUPERVISOR (*All applications MUST be verified*)

I _____ confirm that the above information concerning wastewater treatment
Supervisor Printed Name and Title
operations experience is true and accurate to the best of my knowledge.

Supervisor's Signature: _____ Supervisors Comments: _____

SECTION H – OTHER – Please indicate how you feel you meet the requirements. This space may also be used for any other comments you may have.

This form must be used for all applications submitted until December 31, 2008. After December 31, 2008, this form cannot be used and new forms will be available.

OPERATOR CERTIFICATION APPLICATION – PART B – WASTEWATER COLLECTION

SECTION D – Application for Wastewater Collection Level I

Exam Location and Date Requested: _____

SECTION E – EXPERIENCE

SUMMARY OF WASTEWATER COLLECTION OPERATING EXPERIENCE:

Date Current Position (**Employment**) Commenced: Day _____ Month _____ Year _____
For previous positions attach additional pages with appropriate information

Duties: Provide a description of operation duties and level of responsibility in wastewater collection operations. Also attach a copy of your current position description.

Estimated hours per day spent in wastewater collection operations: ____

SECTION F – DECLARATION OF APPLICANT

I _____ confirm that the information on this application is true and accurate to the best of my knowledge.
Printed Name

Signature of Applicant: _____ Date: _____

SECTION G – VERIFICATION BY SUPERVISOR (*All applications MUST be verified*)

I _____ confirm that the above information concerning wastewater collection
Supervisor Printed Name and Title
operations experience is true and accurate to the best of my knowledge.

Supervisor's Signature: _____ Supervisors Comments: _____

SECTION H – OTHER – Please indicate how you feel you meet the requirements. This space may also be used for any other comments you may have.

This form must be used for all applications submitted until December 31, 2008. After December 31, 2008, this form cannot be used and new forms will be available.