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

General

This form should be used for all Level IV Water Treatment OR Wastewater Treatment 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.

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, plus four years of Post Secondary Education (or 180.0 CEUs). A photocopy of the diploma/degree or a transcript indicating that a diploma/degree was granted must accompany the application. If you are applying using CEUs, a copy of course completion certificates must also accompany this application. Substitutions are allowed please see the Alberta Water & Wastewater Operators Certification Guidelines for further information (http://www3.gov.ab.ca/env/water/dwg/certification.html)

Section C - Substitution of Education for Experience

For Level IV Water Treatment or Wastewater Treatment Certification your require four years of municipal relevant operating experience. Substitutions are allowed please see the Alberta Water & Wastewater Operators Certification Guidelines for further information (http://www3.gov.ab.ca/env/water/dwq/certification.html)

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 or wastewater treatment). If qualified at Level IV an operator may only write one Level IV exam per exam session.

Exams can be rewritten after a six-month waiting period. Candidates <u>must</u> rewrite within one year. Other restrictions may apply regarding rewrites. Please see the Alberta Water & 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 <u>MUST</u> be completed with details. A separate page for each category (i.e. water treatment or wastewater treatment) 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. If using substitutions, please use this space to show how you feel you meet the requirements. 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 IV Certification Water Treatment/Wastewater Treatment

A. Education

		High School Diploma, General Educational Development (GED)	
		transcript or High School Equivalency Diploma required.	
		A copy of your diploma/transcript would have been sent in with your Level I	
		application therefore you do not need to send a copy again.	
		Form vectors are provided to set accompliant advection	1
		Four years approved post secondary education	
		or 180 CEUs	
		With Substitutions:	
		Minimum two years post secondary education or 90 CEUs	
		The second of th	
		Substitutions used:	
		Copy of relevant education documentation must be attached	
_	_		
B.	ЕX	perience	1
		Minimum four years current operating experience in a	
		treatment plant, at least two of which must be in a Class III or IV facility	
		years	
		Attach a copy of your current organizational chart	
C.	DF	RC Experience (may be part of the four years operating experier	nce (see "B")
		Minimum two years DRC experience in a Class III or IV facility	
		years	
		Note: Additional DRC (maximum 2 years) may be used as substitution for Education in "A" above	
D.	Ela	apsed Time	
		One year since obtaining Level III Certification	
		Date of Level III Examination:	_
		<u> </u>	
		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 & Wastewater Operator Certification Program

Type or Print Clearly All Information

Alberta Environment

	Position Title:
Mailing Address:	
Email Address:	Postal Code
Current Employer:	Facility:
Work Address:	
Work Phone Number: ()	Postal Code FAX Number: ()
Area code Supervisor's Name:	Area code Supervisor's Title:
SECTION C - SUBSITUTION	OF POST SECONDARY EDUCATION FOR EXPERIENCE – ee the Alberta Water & Wastewater Operators Certification Guidelines for furth env/water/dwq/certification.html) Please attach a copy of the degree or
Substitutions are allowed. Please seinformation (http://www3.gov.ab.ca/e	niv/water/dwd/certification.nitifil) Friease attach a copy of the degree of
Substitutions are allowed. Please so information (http://www3.gov.ab.ca/e confirmation of CEUs.	s) must accompany this application
Substitutions are allowed. Please so information (http://www3.gov.ab.ca/econfirmation of CEUs. Experience Summary Page(

This application is only good until December 31, 2008

(780) 427-5204

FAX:

OPERATOR CERTIFICATION APPLICATION – PART B – WATER TREATMENT

SECTION D – Application for Water Treatment Level IV

Exam Location	and Date Requested	:						
SECTION	E – EXPERIE	NCE						
SUMMARY	OF WATER TRE	ATMENT O	PERATING	EXPERI	ENCE:			
	osition (Employment sitions attach addition			Day formation		Month	Year	
	de a <u>description of op</u> ion description.	peration duties	and level of re	esponsibility i	n water treat	ment operat	ions. Also attac	h a copy of your curre
SUMMARY	s per day spent in wa	SPONSIBLE	perations:	(DRC) EX	PERIENC	E RELAT	ED TO	
			DRC experier	nce (as define	ed in the guid	delines). Inc	licate facility and	classification where DR
Facility:				Class:				
DRC Period: Fi	rom Month	Year	TO Mor	nth	Year	!	Hours per month	spent in DRC
List DRC Duties	s:							
When applying application.	for Level IV Water Tr	eatment Certifi	cation a copy	of your depa	rtment/munic	cipality orgar	nization chart ML	IST accompany your
SECTION	F – DECLAR	ATION OF	F APPLIC	ANT				
Iknowledge.	Printed Name				on this app	lication is tru	ue and accurate t	o the best of my
Signature of Ap							Date:	
	G – VERIFICA							
				-				water treatment operation
S	Supervisor Printed Name and	d Title						
experience is tro	ue and accurate to th	e best of my kr	nowledge.					
Supervisor's Sig	gnature:			Super	visor's Comi	ments:		
SECTION comments you	H – OTHER - may have.	- Please indica	ate how you fe	el you meet	he requirem	ents. This s	pace may also b	e used for any other

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OPERATOR CERTIFICATION APPLICATION – PART B – WASTEWATER TREATMENT

SECTION D – Application for Wastewater Treatment Level IV 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: SUMMARY OF DIRECT RESPONSIBLE CHARGE (DRC) EXPERIENCE RELATED TO WASTEWATER TREATMENT OPERATIONS To be certified at a Level IV an operator must have DRC experience (as defined in the guidelines). Indicate facility and classification where DRC experience was obtained. Facility:____ Class: DRC Period: From Month_____Year___ TO Month_____Year____ Hours per month spent in DRC_____ List DRC Duties: When applying for Level IV Wastewater Treatment Certification a copy of your department/municipality organization chart MUST accompany your application. SECTION F - DECLARATION OF APPLICANT 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) _ 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: Supervisor's 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.

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