

EDUCATIONAL REQUIREMENT: All applicants for certification are required to have graduated from high school or hold a G.E.D. Certificate, unless the applicant submits a written application for a special exception from this requirement and the department grants the exception. Contact the certification office to receive a high school diploma waiver form.

Two days of education in post-secondary engineering training or the equivalent may be substituted for each day of experience up to 1/2 of the experience requirement described on the front of this application. **This education will not be considered unless the dates of completion and degrees earned are listed.**

HIGH SCHOOL DIPLOMA _____
Name and Location _____ Year Graduated _____

or G.E.D CERTIFICATE _____
State Where Issued _____ Date of Issue _____

or HIGH SCHOOL WAIVER _____
(DEQ employee's initials) _____ (Date of Approval) _____

COLLEGE OR VO-TECH _____
Name and Location _____ Major and Minor Curricula _____

_____ Degree earned _____ Date _____ Quarters or Semesters Completed _____

OTHER COLLEGE OR VO-TECH _____
Name and Location _____ Major and Minor Curricula _____

_____ Degree earned _____ Date _____ Quarters or Semesters Completed _____

EMPLOYER NOTIFICATION (Your employer will automatically be notified if they paid your application and examination fees. If your employer **DID NOT** pay, please check one):

_____ Please notify my present employer of the results of my examination(s).

_____ DO NOT notify my present employer of the results of my examination(s).

CERTIFICATE OF APPLICANT: (*Important - Please read carefully before signing. Unsigned and undated applications will be invalidated or returned. All signatures must be notarized.*)

I agree to uphold the Montana Operator Code of Ethics which reads: "Using my best judgment and operating skills, I will always work, to protect the public health, to ensure good service, to protect public property and the environment, by applying my skills in operating water and wastewater system equipment, by properly and accurately completing required records, following and complying with state and federal rules and regulations, continuing my education in my field, and working with management to establish distinct and safe operating policies for the public utilities for which I am entrusted."

I swear under penalty of perjury that all information provided in this application submitted for certification is true. I understand that misstatement of material facts may result in forfeiture of all rights to certification in accordance with Section 37-42-101 through 37-42-322, MCA.

SIGNATURE _____ **DATE** _____
(Applicant's signature)

Signed before me this _____ day of _____, 20 _____

(SEAL)

NOTARY PUBLIC for the State of Montana
Residing at _____, Montana
My commission expires: _____