



**NEVADA WATER ENVIRONMENT ASSOCIATION
PLANT MAINTENANCE TECHNOLOGIST
APPLICATION FOR CERTIFICATION**
(Revised February 2009)

Full Name: _____ Grade Applying For: _____
(Please print/type your name as you want it to appear on certificate) (1 or 2)

Address: _____ Home Phone: _____
(Street Number) (City) (State) (Zip Code) Cell Phone: _____

Email Address: _____

NOTE: The technologist is responsible to notify Administrator of future address changes.

Applying for: EXAMINATION Preferred Testing Location: Las Vegas Reno Ely Elko Other
RECIPROcity From What State? _____

Total Amount of Experience as a Plant Maintenance Technologist: _____ Years _____ Months
(List only full-time or equivalent (FTE) plant maintenance employment)

PRESENT EMPLOYMENT

Employer: _____ Employer's Phone #: _____

Date of Hire: _____

Address: _____

Job Title: _____ Length of Service as a Plant Maintenance Tech.: _____

Give a description of your job duties: _____

Name of Supervisor: _____

I am aware that there are significant penalties for attesting to false information. _____

Signature of Supervisor/Date

PRESENT EMPLOYER'S TREATMENT FACILITIES

Type of Treatment: _____ Treatment Capacity: Average _____ MGD Maximum _____ MGD

Type of Agency: Public Private Other: _____

Brief Description of Treatment Plant: _____

Types of Methodology Used: _____

EDUCATION

List below the name of school, location, city and state in which you attended school	Years Attended	List Science, Engineering or Wastewater Courses and Degree(s) Obtained
(a) High School		
(b) College		
(c) Graduate School		
(d) Trade Business or Correspondence		

(e) Maintenance Courses Satisfactorily Completed: _____

Other education or training you have had (science or wastewater related): _____

Are you presently enrolled in a maintenance course? Yes No

Instructor's Name: _____ Where: _____

PREVIOUS PLANT MAINTENANCE WORK EXPERIENCE

Dates of Service	Total Years	Employer's Name/Address/Phone	Your Position/Supervisor's Name

Summarize any additional experience you have had which qualifies you for certification as a Plant Maintenance Technologist: _____

REFERENCES

Give at least three references as to your maintenance ability (Supervisors, Foremen, etc.)

	Name	Address	Phone	Job Title
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

Do you hold a valid Plant Maintenance Technologist's Certificate? Yes No State: _____
Grade: _____ Certificate #: _____ Issue Date: _____ Date Renewed: _____

Was this certificate received by reciprocity? Yes No If yes, from what state? _____

I certify that the information provided, including attachments, is true and accurate. If this information is found to be untrue or inaccurate I am aware that my certification may be suspended or revoked.

DATE: _____ SIGNATURE: _____

Please note: Obtaining certification as a Plant Maintenance Technologist does not satisfy the NAC 445A.287-292 certification requirements for operator of a plant for sewage treatment.

The application fee of \$150 payable to N.W.E.A. (Nevada Water Environment Association) is due and payable at the time of filing this application. The fee is \$200 for reciprocity. Certificates are valid for two years, and renewable upon payment of \$80 fee.	MAIL TO: NWEA P.O. Box 190 Smith, NV 89430 (775) 465-2045
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Items Below for Committee Use Only	
Payment Received: _____	
Check No.: _____	
Approved for Grade: _____	Not Approved <input type="checkbox"/> _____ <i>Administrator Signature</i>
Examination Date: _____	Examination Proctor: _____
Examination Location: _____	
Examination Score: _____	Pass <input type="checkbox"/> Fail <input type="checkbox"/> Certified for Grade: _____
Certificate Issued: _____	Certificate No.: _____ Expires: _____