



**NEVADA WATER ENVIRONMENT ASSOCIATION
WASTEWATER QUALITY ANALYST
APPLICATION FOR CERTIFICATION**
(Revised August 2009)

Full Name: _____ **Grade Applying For:** _____
(Please print/type your name as you want it to appear on certificate) *(1, 2, 3, or 4)*

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

Email Address: _____

NOTE: The applicant 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 Wastewater Quality Analyst: _____ Years _____ Months
(List only full-time or equivalent (FTE) Analyst employment)

PRESENT EMPLOYMENT

Employer: _____ **Employer's Phone #:** _____
Date of Hire: _____
Address: _____

Job Title: _____ **Length of Service as an Analyst:** _____
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

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) Laboratory related courses satisfactorily completed: _____

(f) Give any other education or training you have had (*science or wastewater related*): _____

Are you presently enrolled in a wastewater course?

Yes No

Instructor's Name: _____

Where: _____

PREVIOUS WASTEWATER QUALITY ANALYST 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 Wastewater Quality Analyst: _____

REFERENCES

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

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

Do you hold a valid Wastewater Quality Analyst 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: _____

<p>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.</p>	<p>MAIL TO: NWEA P.O. Box 190 Smith, NV 89430 (775) 465-2045</p>
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Items Below for Committee Use Only

Payment Received: _____
Check No.: _____

Approved for Grade: _____ Not Approved _____ Administrator Signature

Examination Date: _____ Examination Proctor: _____

Examination Location: _____

Examination Score: _____ Pass Fail Certified for Grade: _____

Certificate Issued: _____ Certificate No.: _____ Expires: _____