



Wastewater Operator Certification Program Application for Approval of Training Contact Hours (TCHs)

To obtain approval, please complete this form and submit with supporting documentation.

Name of Person or Organization Requesting Approval:

Phone #: _____ Email: _____

COURSE INFORMATION:

Course Title: _____

Training Organization: _____

Training Organization Contact: _____

Training Organizer's Phone #: _____ Email: _____

Date(s) of Training: _____

Location of Training: _____

Number of TCHs requested: _____ Begin & End Times of Training: _____
(i.e. 8:00am – 5:00pm) *

Please provide a description of how the proposed wastewater training class, session, or webinar has relevance to the operation and maintenance, safety, or management of a wastewater treatment plant:

Attach additional sheet if necessary

Attach the following supporting documentation:

- Agenda, brochures, or materials that describe the training topics covered and the time allotted for each topic of the class. Check-in, breaks, and lunch times must also be noted. (**Note: time taken for check-in, breaks, and lunch is not eligible for credit hours*).
- Instructor(s) credentials – this could be a brief paragraph explaining their credentials or they may provide a Bio or Resume. (*Note: you do not need to provide credentials if the instructor has already been DEP-approved*).

SUBMIT THIS FORM WITH THE ABOVE SUPPORTING DOCUMENTATION TO:

NEIWPCC-JETCC
584 Main Street
South Portland, ME 04106
Email: certification@neiwpcc-jetcc.org
Office: (207) 253-8020 Fax: (207) 771-9028