STATE OF HAWAII BOARD OF CERTIFICATION OF PUBLIC WATER SYSTEM OPERATORS

WATER TREATMENT PLANT OPERATOR (WTPO) CERTIFICATION APPLICATION

Type of Application

☐ Regular Certification
Grade: ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ Reciprocity Certification (current certificate required)
Grade: ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ Provisional Certification
Grade: ☐ 1 ☐ 2

☐ Temporary Certification
Grade: ☐ 2 ☐ 3

☐ Operator-In-Training

Exam Information

Exam Date: ☐ 1/23/2018 (application due 10/23/2017) ☐ 7/24/2018 (application due 4/24/2018)

Applicant Information

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

_____

_____

_____

Email: _____

Phone: _____ Fax: _____

PWS ID: _____ Water System: _____

Work Experience

Summary of Water Treatment Plant operating experience (most recent first):

Water Purveyor	Job Title	From (month/year)	To (month/year)	Duration (years/months)

Total Duration: _____

Each job listed in the summary requires a separate Work Experience Record. You may duplicate the Work Experience Record on the last sheet of this form as needed. Resumes or job descriptions will be considered optional information and will not substitute for the Work Experience Record. Additional information may be placed on separate numbered sheets and attached to the application.

WTPO Application

Education

High School Attended: _____

Location: _____ Highest Grade Completed: _____

College, University, Graduate School or In-Service Training:

Name & Address	Course or Major Field of Study	Number of Hours or Credits		Degree, Diploma or Certificate
		Semester	Quarter	

Attach official copy of university or college transcripts for each institution attended, if you are using your college degree to reduce the amount of experience required.

Certifying Signature

I certify that all the information contained in this application is true and correct to the best of my knowledge and belief. I understand that knowingly making false statements may result in revocation of any certificate granted to me under the provisions of Hawaii Administrative Rules, Section 11-25-9(a).
I also consent to allow the Board to investigate and verify my employment record and other statements for the purpose of determining my qualifications for certification examination.

_____

Applicant Signature Date

Instructions

Fee: Cashier's Check or Money Order payable to State of Hawaii. No personal checks accepted.

- Regular Certification Application $20 (with Exam Registration total $50)
- Temporary Certification Application $40 (with Exam Registration total $70)
- Provisional Certification Application $40 (with Exam Registration total $70)
- Reciprocity Certification $50
- Operator-In-Training $40

Due Date: Certification Application ($20) & Exam Registration ($30) are due 3 months before the exam date

Attachments (as required):

- Current out-of-state certificate with expiration date for Reciprocity Certification Application
- Work Experience Record(s) for all Certification Applications with Supervisor Signature
- Official copy of college transcripts if using college degree to reduce the amount of experience required

Submit

- by Mail to: Board of Certification of Public Water System Operators
  Hawaii Department of Health, Safe Drinking Water Branch
  2385 Waimano Home Rd.
  Uluakupu Building 4
  Pearl City, HI 96782
- by Fax to: 808-586-4351 (Fee & Certifying Signature must be mailed)
- by Email to: sdwb@doh.hawaii.gov (Fee & Certifying Signature must be mailed)

WTPO Application

Work Experience Record (each job requires a separate sheet)

Name: _____ Title: _____

From (month/year): _____ To (month/year): _____ Duration (years/months): _____

Water Purveyor: _____ Phone: _____

Purveyor's Address: _____

_____

Supervisor Name & Title: _____

I certify that the applicant's work experience statement for this position is correct.

_____

Supervisor Signature Date

Operator Experience & Duties (Summarize your experience in your own words):

_____

Average hours/day spent performing these duties: _____ Number of employees you supervise: _____

Population served: _____ # of connections: _____ Daily water usage: _____

Treatment (check all that apply): ☐ Slow sand filtration ☐ Chlorination ☐ Fluoridation ☐ pH control ☐ Corrosion control ☐ Granular activated carbon filtration ☐ Packed aeration towers ☐ Air stripping towers ☐ Membrane filtration ☐ Cartridge filtration ☐ Distillation ☐ Electrodialysis ☐ Reverse osmosis ☐ Diatomaceous earth filtration ☐ Package treatment plants w/ diatomaceous earth filtration ☐ Conventional treatment ☐ Direct filtration ☐ Package treatment plants w/ conventional treatment or direct filtration

Other Treatment: _____

Water System Complexity (Provide a brief description of the water system):

WTPO Application