



OIT Exam Application

State of Alaska
Department of Environmental Conservation
410 Willoughby Avenue, Suite 303
Juneau, AK 99801-1795
Attn: Operator Certification

OIT Exam 1: _____

OIT Exam 2: _____

General Information:

Please print, incomplete applications will not be considered.

Name: _____

First

Middle

Last

Mailing Address: _____

Mailing Address

City

Zip

Education:

Years of elementary or high school (circle number of years completed) 6 7 8 9 10 11 12 GED

If you **do not** have 12 years of education or a GED, you must fill out the back portion of this application.

Name of High School or GED granting organization _____

What is the name of the course you are attending NOW? _____

Who is sponsoring the course you are attending NOW? _____

Experience:

Do you **currently** work as a water or wastewater operator? (Yes or No) _____ (if "no", skip to "Your Signature")

If yes, who do you work for? (example, City of..., Village of..., ...Village Council) _____

What system do you operate? (example, City of ...'s water system) _____

What is the plant phone number? (your work number) _____

What is the name of your supervisor? _____

What is your Status: full time part time seasonal

Job Title: _____ Hours/Day: _____ Days/Week: _____ Describe your duties and types of systems you operate (for example: system size; flows; system components; types of equipment; chemical or biological processes; length of distribution or collection system; number of pumps stations; number of customers; etc)

Your Signature

I hereby certify that the information provided is true and complete to the best of my knowledge and belief.

Signature _____ Date _____

Complete ONLY if you do not have 12 years of education or a GED!

To be eligible for certification, you must have 12 years of education OR enough experience to substitute. Experience can be substituted for education on a year for year basis; documentation of your experience is required.

Experience:

List your experience in water treatment, wastewater treatment, water distribution and wastewater collection systems

WWT = Wastewater Treatment WT = Water Treatment WD = Water Distribution WWC = Wastewater Collection

Present Employment

Date from: _____ to: _____ Total _____ years _____ months Employer: _____ Address: _____ Street City _____ State _____ Zip _____ Supervisor: _____	% time spent working in each system type	Job Title: _____ Hours/Day: _____ Days/Week: _____ Describe your duties and types of systems operated in detail (for example: system size; flows; system components; types of equipment; chemical or biological processes; length of distribution or collection system; number of pumps stations; number of customers; etc)
	% WWT =	_____
	% WT =	_____
	% WD =	_____
	% WWC =	_____

Past Employment

Date from: _____ to: _____ Total _____ years _____ months Employer: _____ Address: _____ Street City _____ State _____ Zip _____ Supervisor: _____	% time spent working in each system type	Job Title: _____ Hours/Day: _____ Days/Week: _____ Describe your duties and types of systems operated in detail (for example: system size; flows; system components; types of equipment; chemical or biological processes; length of distribution or collection system; number of pumps stations; number of customers; etc)
	% WWT =	_____
	% WT =	_____
	% WD =	_____
	% WWC =	_____