

## **Operator Certification Board**

Mail Room 3211 Albert St, Regina, SK S4S 5W6

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Phone: 306-789-3430 Fax: 306-789-3429

## Water and Wastewater Utility Operator Class 3 Upgrade Application

Applicant Contact Information				
First Name	Middle Initial	Last Name		
Address	City / Town		Province	Postal Code
Phone	Email Address			
Employer / Facility Name			Facility Classif	ication
Applying for (check all that apply):				
☐ Class 3 Water Treatment	☐ Class 3 Water Treatment ☐ Class 3 Water Distribution			
☐ Class 3 Wastewater Treatment	☐ Class 3 Wastewater Treatment ☐ Class 3 Wastewater Collection			n
Current Certification				
Current certification level held (ch	•			
□ Class 2 Water Treatment □ Class 2 Water Distribution				
☐ Class 2 Wastewater Treatment				
□ Not currently Level 2 certified – applying for more than one level at this time				
Part A - Education				
Must meet the educational require	ements in <u>one</u>	of the fo	ollowing metho	ods:
☐ Obtained a minimum of 2 years post-secondary education in a related field				
Explain (and attach proof):				
<u>OR</u> □ Substitute for missing post-secondary education in the following manner:				
Explain (and attach proof):				
Note – Operators may substitute 45 CEUs for 1 year of missing post-secondary education or 90 CEUs for 2 years of missing post-secondary education. Operators may also substitute 1 year of DRC in Class 2 or higher facility for 1 year of missing education (to a maximum of 1 year). Operators may use a combination of 1 year of DRC plus 45 CEUs for 2 years of missing post-secondary education.				

Part B - Exams		
Must submit all exam marks that are applicable (and attach proof to this application):		
☐ Class 3 Water Treatment Final Grade%		
☐ Class 3 Water Distribution Final Grade%		
☐ Class 3 Wastewater Treatment Final Grade%		
☐ Class 3 Wastewater Collection Final Grade%		
Port C Evnoriones		
Part C - Experience  Attach an experience sheet for each area of certification		
Applicants in Class 3 are required to have four (4) years of experience; but may substitute for missing experience in a variety of ways. Please check which applies to this		
application:		
☐ I have 4 years of experience; no substitution required		
or I am substituting for missing experience		
If substituting for missing experience please explain below (be specific):		
Part D – Direct Responsible Charge (DRC)  Not required for Water Distribution or Wastewater Collection		
Level 3 Water Treatment and Wastewater Treatment applicants are required to have 2 of		
their 4 years of operating experience as DRC in a Class 2 or Class 3 facility. Applicants		
who are short DRC experience may substitute for that missing experience in a variety of ways. Please check which applies to this application:		
☐ No substitutions required		
Experience is in a Class 4 facility; no DRC is required		
☐ I am substituting for missing DRC experience		
If substituting for missing experience please explain below (be specific):		

## **Authorization**

I hereby certify with my signature that all information contained in this application is true and correct. I understand that any omissions or misrepresentations may result in ineligibility for the certification applied for or revocation of any certificate granted. I also consent to an investigation of my employment record and education background for the purpose of verifying my qualifications for the certificate for which I have applied.

Signature of Applicant	Date	
Ensure to fully complete each section. I	cation Checklist ncomplete applications and/or applications that do not mentation attached will not be processed.	
☐ Part A - Submit proof of educa	•	
☐ Part B - Submit proof of exam marks with this application		
☐ Part C - Submit Summary of Experience pages signed by a qualified supervisor		
☐ Part D – Submit proof of DRC	experience (if applicable)	
☐ Applicant has signed the application verifying all information is accurate		

## **Summary of Class 3 Water Treatment Experience** Complete a separate page for each employer **Applicant Name: Employer Name:** Facility Classification: ☐ Class 1 ☐ Class 2 ☐ Class 3 ☐ Class 4 Position: ☐ Full Time □ Part Time ☐ Relief Employment Dates: If not full time please indicate typical hours & days per From: \_\_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_ (Month) week: Hours/Day: \_\_\_\_\_ Days/Week: \_\_\_\_\_ **Water Treatment Operational Experience** Describe your responsibilities and duties in detail: Water Treatment Direct Responsible Charge Experience DRC Experience Dates (DRC only starts accumulating once an operator obtains Class 2 certification): From: \_\_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_ (Month) (Year) (Month) (Year) Describe your DRC responsibilities and duties in detail: **Verification by Supervisor** I hereby certify with my signature that the operating / DRC experience described above is true and correct. I understand that any omissions or misrepresentations may result in ineligibility of the applicant or revocation of any certificate granted. Supervisor Name: Position: Supervisor Signature: Date:

Summary of Class 3 Water Distribution Experience  Complete a separate page for each employer				
Applicant Name:	Employer Name:			
Facility Classification:	ss 2			
Position:	☐ Full Time ☐ Part Time ☐ Relief			
Employment Dates: From: / To: / (Month) (Year)	If not full time please indicate typical hours & days per week:  Hours/Day: Days/Week:			
Water Distribution	on Operational Experience			
Describe your responsibilities and duties	in detail:			
Verification by Supervisor				
I hereby certify with my signature that the operating experience described above is true and correct. I understand that any omissions or misrepresentations may result in ineligibility of the applicant or revocation of any certificate granted.				
Supervisor Name:	Position:			
Supervisor Signature:	Date:			

Summary of Class 3 Wastewater Treatment Experience  Complete a separate page for each employer			
Applicant Name:	Employer Name:		
Facility Classification:	ss 2   Class 3   Class 4		
Position:	☐ Full Time ☐ Part Time ☐ Relief		
Employment Dates: From: / To: /	If not full time please indicate typical hours & days per week:		
(Month) (Year) (Month) (Yea	week: Hours/Day: Days/Week:		
Wastewater Treatr	ment Operational Experience		
Describe your responsibilities and duties	in detail:		
Wastewater Treatment Dir	ect Responsible Charge Experience		
DRC Experience Dates (DRC only starts acc From: / To: / (Month) (Year) (Month) (Year			
Describe your DRC responsibilities and o	luties in detail:		
Verifica	tion by Supervisor		
	ne operating / DRC experience described above is true ons or misrepresentations may result in ineligibility of the granted.		
Supervisor Name:	Position:		
Supervisor Signature:	Date:		

Summary of Class 3 Wastewater Collection Experience  Complete a separate page for each employer				
Applicant Name:	Employer Name:			
Facility Classification: ☐ Class 1 ☐ Class 2 ☐ Class 3 ☐ Class 4				
Position:	☐ Full Time ☐ Part Time ☐ Relief			
Employment Dates: From: / To: / (Month) (Year) (Month) (Year)	If not full time please indicate typical hours & days per week:  Hours/Day: Days/Week:			
Wastewater Collect	tion Operational Experience			
Describe your responsibilities and duties	in detail:			
Verification by Supervisor				
I hereby certify with my signature that the operating experience described above is true and correct. I understand that any omissions or misrepresentations may result in ineligibility of the applicant or revocation of any certificate granted.				
Supervisor Name:	Position:			
Supervisor Signature:	Date:			