

Name of applicant _____ S.I.N. _____

If applying for Class III or Class IV, please complete the following:					
Direct Responsible Charge (DRC) Experience					
Facility Name:					
DRC Period	From (Y - M - D)	To (Y - M - D)	Facility Classification		
			Class II <input type="checkbox"/>	Class III <input type="checkbox"/>	Class IV <input type="checkbox"/>
Verification by Supervisor					
	Print Name and Title			Signature	
If applying for Class III or Class IV, please list relevant education/experience below and attach documentation to support the required education requirements have been met.					
Class III		Class IV		Equivalency of Post-Secondary Education Years to Hours/CEUs	
High School diploma, GED or equivalent. As well as at least one of the following: <ul style="list-style-type: none"> - 900 contact hours - 90 Continuing Education Units (CEUs) - 90 quarter credits - 60 semester credits of post high school education in the environmental control field, engineering or related science. 		High School diploma, GED or equivalent as well as at least one of the following: <ul style="list-style-type: none"> - 1,800 contact hours - 180 Continuing Education Units (CEUs) - 90 quarter credits - 120 semester credits of post high school education in the environmental control field, engineering or related science. 		1 year = 450 hours (45 CEUs) 1.5 years = 675 hours (68 CEUs) 2 years = 900 hours (90 CEUs) 3 years = 1350 hours (135 CEUs) 4 years = 1800 hours (180 CEUs)	
Indicate areas of relevant education	Description and Location			Hours	Office use only
<input type="checkbox"/> Contact Hours	-----			-----	-----
<input type="checkbox"/> Continuing Education Units (CEUs)	-----			-----	-----
<input type="checkbox"/> Quarter Credits	-----			-----	-----
<input type="checkbox"/> Semester Credits	-----			-----	-----

*Substitutions may be applied but cannot exceed 50% of each required field. Please complete the above table based on your current experience/education. The substitutions will be applied by The Apprenticeship and Occupational Certification office.

_____	_____	_____
Applicant Signature	Please Print Name	Date