

DECLARATION OF SELF-PACED TRAINING EXAMINATION MONITORING

If an examination monitor is required, both the examination monitor and the student must complete this form for each Self-Paced Training course examination completed. The student is responsible for submitting this form and all other course completion documents to Washington Certification Services for evaluation and processing.



SubmittalsWCS@greenriver.edu



Washington Certification Services
Green River College 1221 D
Street NE Auburn, WA 98002

EXAMINATION MONITOR DECLARATION

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I have read, understand, and followed the Department of Health's *Self-Paced Training Approval and Examination Procedure*

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I certify that I personally monitored the examination for the following course on the dates listed

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I certify the student named below completed the examination without assistance from any source

Student Name (Please Print):

Course Title:

Course Sponsor:

Examination Date:

Examination Location:

Exam Monitor Name (Please Print):

Relationship to Student:

Exam Monitor's Employer:

Employer Address:

City:

State:

Zip Code:

Job Title:

Business Phone:

Exam Monitor Signature:

Date:

STUDENT DECLARATION

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I have read, understand, and followed the Department of Health's *Self-Paced Training Approval and Examination Procedure*

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I certify that I personally completed the course listed above and that my work was based solely on my own personal efforts

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I certify that I have personally completed the examination in the presence of the examination monitor listed above without assistance from any source

Student Name (Please Print):

Washington Waterworks Operator Certification Number:

Student Signature:

Date: