

Waterworks Operator

SELF-PACED TRAINING SUBMITTAL FORM

Only Self-Paced Training courses pre- approved by Washington State Department of Health (DOH) or completed through an accredited college or university may be submitted for CEU evaluation towards the waterworks professional growth requirement. All courses must be completed following the Department's policies and procedures as explained in the Approval and Exam Procedure and Self- Paced Training Reference Guide. Incomplete forms or submissions received without all required attachments will be returned to the originator.

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submittalsWCS@greenriver.edu



Washington Certification Services 1221 D St NE Auburn, WA 98002

OPERATOR INFORMATION												
First Name:			Last Nai	Last Name:						MI:		
Home Address:			City:	City:								
State: Zip Code:			Zip Code:		Email:							
Home Phone Number:				iterworks Op	erworks Operator Certification Number:							
COURSE INFORMATION												
Course Title:				Course Completion Date								
Cou	rse Spon	sor:										
Course Format: Online Correspondence Course												
CEU/College Credit Awarded by Course Sponsor:												
This training is listed on WCS's Approved Self-Paced Stu				Study Cours	e List:		Yes		No			
REQUIRED ATTACHMENTS												
Declaration of Self-Paced Training Exam Monitoring (if required)												
Check appropriate box below:												
		cate of completion or transcript verifying CEU awarded by the sponsor. (CEU accepted in Washington may be at than the CEU awarded by the course sponsor.)										
		cript and course description verifying college credit awarded by an accredited college or university for Self-Paced ng that meets DOH relevancy criteria.										
FOR OFFICE USE ONLY												
CEU/College Credit Accepted:							Deny					
Notes												