

<b>Mail to:</b>	Commonwealth of Kentucky Department for Environmental Protection	<i>For Official Use Only Do not write in this space</i>
Division of Compliance Assistance Certification and Licensing Branch Operator Certification Program 300 Fair Oaks Lane Frankfort, KY 40601	<b>Application for Certification</b>	
	Landfarm Operator Landfill Operator and/or Manager Compost Operator Telephone 1-800-926-8111 <a href="http://dca.ky.gov/certification">dca.ky.gov/certification</a>	

**If you are requesting to attend a certification school or to take an examination, you must complete this form as well as the Registration Form for Exams and Training.**

APPLICANT INFORMATION				
Name (First)	(Middle Initial)	(Last)	Agency Interest Number (as shown on wallet card)	
Address (Number and Street)		City	State	Zip Code
E-Mail Address	Home Phone Number ( )		Business Phone Number ( )	

CURRENT CERTIFICATIONS			
List all current landfarm, landfill and/or compost certifications.			
Certification Type	Certificate Number	Certificate Level (Operator or Manager)	Expiration Date

FACILITY INFORMATION					
List all facilities where you currently work as an operator. Attach additional sheets as necessary.					
Facility Name	Facility Address (Physical Address)	County	Permit Number or Agency Interest Number	Facility Type	Phone Number

As a certified operator, have you ever been the subject of a disciplinary action? (Probation, suspension or license revocation)  
 No  Yes If yes, please explain and identify the year and the state agency that implemented the action.

EDUCATION AND TRAINING		
Circle the highest grade completed and fill in the appropriate blanks.		
Elementary School 1 2 3 4 5 6 7 8	School Name and Address	
High School or GED 9 10 11 12	School Name and Address	
College - Undergraduate	School Name and Address	Degree and Major
College - Graduate	School Name and Address	Degree and Program
Other training applicable to the certification requested. Provide the course name and content. Attach documentation of completion and credit hours earned.		
Course Name	Content	
Course Name	Content	
A COPY OF OFFICIAL EDUCATION TRANSCRIPTS OR RECORDS VERIFYING EDUCATION MUST ACCOMPANY THIS APPLICATION (i.e. GED certificate, high school diploma, college transcripts or diploma)		



**WORK EXPERIENCE**

List your current position first. List all the duties associated with each position, but be specific regarding your landfill, landfarm and/or composting operational duties. If your duties are split between several areas of responsibility, indicate the percentage of time spent working in each area. (Attach additional sheets if you need to list additional experience).

Facility Name	Job Title	Permit Number or Agency Interest Number
Facility Address	Dates of Employment Month Year to Month Year	
Supervisor Name	Phone Number ( )	
Detailed description of duties:		
Facility Name	Job Title	Permit Number or Agency Interest Number
Facility Address	Dates of Employment Month Year to Month Year	
Supervisor Name	Phone Number ( )	
Detailed description of duties:		
Facility Name	Job Title	Permit Number or Agency Interest Number
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Facility Name	Job Title	Permit Number or Agency Interest Number
Facility Address	Dates of Employment Month Year to Month Year	
Supervisor Name	Phone Number ( )	
Detailed description of duties:		

**INFORMATION VERIFICATION**

All applications are subject to audit for verification of job duties and employment history.

*I certify that, to the best of my knowledge, the data contained herein is complete and correct. I understand that submission of false information can result in certificate revocation and penalties as defined in KRS 223.991 and /or KRS 224.99-010.*

Print Applicant's Name	Applicant's Signature	Date
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The Kentucky Energy and Environment Cabinet does not discriminate on the basis of race, color, national origin, sex, age, religion or disability and provides, on request, reasonable accommodations, including auxiliary aids and services necessary to afford an individual with a disability an equal opportunity to participate in all services, programs and activities. To request materials in an alternative format, contact the Division of Compliance Assistance, Operator Certification Program, 300 Fair Oaks Lane, Frankfort, KY 40601 or call 1-502-564-0323 or 1-800-926-8111.