

MENTOR COMMITMENT LETTER
Renewal

Date

Division of Compliance Assistance
Certification and Licensing Branch
300 Fair Oaks Lane
Frankfort, KY 40601

Attention: Operator Certification Program

I, _____, do hereby acknowledge that I served as a mentor for _____
_____ (certified OIT) during the Operator-in-Training period.

I recommend the removal of the Operator-in-Training designation from _____
_____ (applicant) Class _____ OIT certification. *Give a brief description of why you
recommend the removal of the OIT designation.*

Sincerely,

Name of Mentor
AI Number