



Request for Wastewater Training Continuing Education Units

Request Date _____

Course Title _____ Course Location _____

Start Date _____ End Date _____ Total Classroom Hours _____

CEUs Requested (1 hour class time = 0.1 CEU) _____

Course format: Classroom Correspondence On-line Conference Recurring

Explain how this course meets the professional growth criteria to operate and maintain a domestic wastewater treatment plant or to manage the operation and maintenance of a domestic wastewater treatment plant.

How will attendance be monitored/verified? _____

Contact Name _____ Company _____

Mailing address _____

City _____ State _____ Zip _____

Phone Number _____ e-mail _____

Required Attachments:

- Course Agenda with timeline – include start and end times, breaks & lunch
- Course Summary or Brochure w/course summaries
- Instructor Information – short biography and credentials or Brochure w/instructor bios

Return completed form and required attachments to: Department of Ecology
Wastewater Operator Certification
PO Box 47696
Olympia, WA 98504-7696

Or email completed form and attachments to: <mailto:opcet@ecy.wa.gov>

Accommodation Requests:

To request ADA accommodation including materials in a format for the visually impaired, call Ecology at 360-407-6600. Persons with impaired hearing may call Washington Relay Service at 711. Persons with speech disability may call TTY at 877-833-6341.

OpCert Staff Use

CEUs _____ Course ID _____ Approval Date _____

Expiration Date _____ Reviewed by _____