

State of California—Health and Human Services Agency
Department of Health Services



SANDRA SHEWRY
 Director

ARNOLD SCHWARZENEGGER
 Governor

APPLICATION FOR WATER DISTRIBUTION OPERATOR EXAM

INSTRUCTIONS TO APPLICANT *(Please read thoroughly)*

1. This Application for Water Distribution Operator Examination, (DHS 8631) must be filled out completely and typed or printed legibly in ink. An incomplete or illegible application will result in a delay in the evaluation of your qualifications and scheduling for examination. All minimum requirements must be met at the time of the submittal of this application.
2. **To verify your educational qualifications, legible copies of official transcripts or certificates of completion (noting the number of hours/units of training completed) must be included.** (Please note: Copies of report cards and unofficial transcripts are not acceptable forms of verification.) Your qualifications are evaluated on the information you submit. All minimum requirements must be met by the final filing date of the exam you wish to participate in. The minimum criterion is listed on the reverse side of this notice.
3. This application is used solely for the purpose of taking the exam. When filling out the application, you must provide all your personal information such as your full name, address, date of birth, social security number, work and home telephone numbers, and current certification status (operator number, grade, issuance date). You must indicate the grade for which you are applying and your application must be signed and dated.
4. The appropriate examination fee must be attached to your application. If you are retaking an exam, remember you need only pay the re-examination fee. Please submit your fee in the form of check or money order, made out to DHS-OCF. **DO NOT SEND CASH.**

GRADE	EXAMINATION FEES	RE-EXAMINATION FEES
1	\$ 50.00	\$ 30.00
2	\$ 65.00	\$ 45.00
3	\$100.00	\$ 70.00
4	\$130.00	\$ 95.00
5	\$155.00	\$120.00

5. If you are not sure of the requirements for a particular grade, please contact this office for clarification before submitting your application as **FILING FEES ARE NONREFUNDABLE.**
6. Mail completed application and filing fee to:

California Department of Health Services
 Drinking Water Program
 Operator Certification Unit, MS 7417
 P.O. Box 997413
 Sacramento, CA 95899-7413
 (916) 449-5611

PROPOSED EXAM SITES* (Grades 1–5)

Bakersfield	Eureka	Fresno	Santa Barbara	Martinez
Modesto	Northridge	Oceanside	Orange County	Palm Springs
Pasadena	Redding	Sacramento	Salinas	San Bernardino
San Diego	San Jose	Santa Rosa	Sun City	Torrance
Stockton				

* Exam sites are in the general vicinity of the cities listed and are subject to change.

Grade Level	Minimum Qualifications for Examination
D1	<ul style="list-style-type: none"> • High School Diploma or GED*
D2	<ul style="list-style-type: none"> • High School Diploma or GED* <p>AND</p> <ul style="list-style-type: none"> • One 36-contact-hour course of specialized training covering the fundamentals of water supply principles.
D3	<ul style="list-style-type: none"> • A valid grade D2 certificate. <p>AND</p> <ul style="list-style-type: none"> • Two 36-contact-hour courses of specialized training that includes at least one course covering the fundamentals of water supply principles.
D4	<ul style="list-style-type: none"> • A valid grade D3 certificate. <p>AND</p> <ul style="list-style-type: none"> • Three 36-contact-hour courses of specialized training that includes at least two courses in water supply principles.
D5	<ul style="list-style-type: none"> • A valid grade D4 certificate. <p>AND</p> <ul style="list-style-type: none"> • Four 36-contact-hour courses of specialized training that includes at least two courses in water supply principles.

* **High school/GED** equivalency for **grades 1 and 2 ONLY** can be fulfilled with **1 year** as an operator of a facility that required an understanding of a piping system that included pumps, valves, and storage tanks.

For more information about specialized training, please visit our website at www.dhs.ca.gov/ps/ddwem/technical/certification/opcert.html.

APPLICATION FOR WATER DISTRIBUTION OPERATOR EXAMINATION

Operator number	Exam results	Date received
Application approved for D1 D2 D3 D4 D5		
Acknowledgement sent	Approval sent	
Application NOT approved		
<input type="checkbox"/> Insufficient specialized training/verification	Certificate dated	Certificate sent
<input type="checkbox"/> High school/GED information incomplete		
Comments		

PLEASE DO NOT WRITE ABOVE THIS LINE

Please type or print legibly in ink.

1. PERSONAL INFORMATION

Name (last, first, middle initial)		Date of birth / /	Social security number - -	
Mailing address (number, street)		City	State	ZIP code
Work telephone number () ext.	Home telephone number ()	E-mail address		
Are you currently certified by the State of California as a water distribution operator ? <input type="checkbox"/> Yes <input type="checkbox"/> No		Operator number	Grade	Issue date

2. EXAMINATION INFORMATION

This application is for grade D	Fee \$	This application is for <input type="checkbox"/> Exam <input type="checkbox"/> Re-exam <input type="checkbox"/> Restricted certificate	Preferred exam site
Do you have an ADA Title I disability/impairment for which you may need assistance during the exam? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please enclose a letter (from a professional authorized to make such assessments) that describes the specific accommodations that will be required.</i>			
Please indicate if your religious beliefs prevent you from taking an exam on Saturday. <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please enclose a letter from your church stating that you are a member in good standing, and why you cannot participate in a Saturday examination.</i>			
If you checked "yes" above, please enclose required letter. Is letter enclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No			

3. HIGH SCHOOL EDUCATION/WORK EXPERIENCE SUBSTITUTION (D1 and D2 applicants only)

Did you graduate from high school? <input type="checkbox"/> Yes <input type="checkbox"/> No		If not , do you possess a GED certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date (month/year)	Name of school	Location (city/state)	
If you are applying for a grade D1 or grade D2 ONLY , and you do not have a high school diploma or GED certificate, you must have one year of experience as an operator of a facility that requires an understanding of a piping system that includes pumps, valves, and storage tanks. <u>This experience must be verified with a copy of your utility's official job description.</u>			
From (mm/yy)	To (mm/yy)	Name and address of employer	Supervisor's name
			Supervisor's telephone number ()
Is your official job description enclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No			

4. SPECIALIZED TRAINING (For grades 2–5 applicants only. Grade 1 applicants proceed to item 5.)

You **MUST** attach legible **COPIES** of **OFFICIAL TRANSCRIPTS** or **CERTIFICATES OF COMPLETION** as proof of attainment of the required course work (certificates of completion must include the number of hours of instruction completed). **PLEASE NOTE: COPIES OF REPORT CARDS OR UNOFFICIAL TRANSCRIPTS ARE NOT ACCEPTABLE VERIFICATION OF COURSE WORK.**

Each course must be a minimum of 36 hours of continuous formal instruction and must be provided by an accredited academic institution or an organization accredited by the International Association of Continuing Education Training (IACET). Please do not submit any course that is less than 36 contact hours.

Grade D2 applicants: One course covering the fundamentals of water supply principles.

Grade D3 applicants: Two courses, one of which must be in water supply principles. The other course can be in drinking water or wastewater treatment, drinking water or wastewater quality, or drinking water or wastewater facility operation.

Grade D4 applicants: Three courses, two of which must be in water supply principles. The other course can be in drinking water or wastewater treatment, drinking water or wastewater quality, or drinking water or wastewater facility operation.

Grade D5 applicants: Four courses, two of which must be in water supply principles. The other two courses can be in drinking water or wastewater treatment, drinking water or wastewater quality, or drinking water or wastewater facility operation.

Before mailing this application be sure to attach legible COPIES of OFFICIAL TRANSCRIPTS or CERTIFICATES OF COMPLETION as proof of attainment of the required course work. Applications will not be processed without these attachments. It is no longer necessary to write down the names of courses you completed on this application.

Please review your application to ensure the following items are completed

- Personal information filled out completely
- Copies of official transcripts or certificates of completion attached for each 36 hour course claimed
- Correct examination fee attached

5. SIGNATURE OF APPLICANT

I, the undersigned, certify that I am the above-named applicant; that all statements made on this application are true and correct; that I understand that any misrepresentations may result in ineligibility for the examination applied for or revocation of any certificate granted, pursuant to Section 106876 of the Health and Safety Code.



Original signature *(Please sign in blue ink.)*

Date

This information is required by the California Department of Health Services, Drinking Water Technical Programs Branch. The authority for maintaining the requested information is the California Code of Regulations, Title 22, Section 63810. All information required on the application form must be provided by the applicant. Failure to complete any portion of this form may result in delay or denial of eligibility for examination and/or certification. The information provided is used to evaluate the applicant's eligibility for examination as a water distribution operator. No transfers of this information are anticipated. For more information, or access to your records, contact the California Department of Health Services, Drinking Water Program, Operator Certification Unit, MS 7417, P.O. Box 997413, Sacramento, CA 95899-7413; telephone number (916) 449-5611.