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| **APPLICATION FOR UNDERGROUND STORAGE TANK** |
| **CONTINUING EDUCATION COURSE APPROVAL Please print or type** |
| **Return to: WV DEP** **UST Unit****601 — 57th Street****Charleston, WV 25304** | **State Use Only Date Reviewed:** |
| **Reviewed By:** |
|   |
| **A. IDENTIFYING INFORMATION**1. **Name of Offering Organization:**
 |
| 1. **Title of Course:**
 |
| 1. **Mailing Address (Street Name & Number, PO Box or Rural Route and Box Number):**
 |
| **4. City/Town: 5. State: 6. Zip** |
| **Code:** |
| 1. **Name of Person to Contact Regarding Application:**
 |
| **8. Telephone Number: 9. Fax Number:** |
|   |
| **10. Email Address:** |
|   |
| **B. CATEGORY OF TRAINING COURSE** **\_\_\_Installation, Retrofit, and/or upgrade** **\_\_\_ Closure and/or change in service** **\_\_\_ UST system testing \_\_\_ Repairs** **\_\_\_ Work Safety** |
| **C. TRAINING COURSE CERTIFICATES****Attach a sample of the certificate that will be issued to persons completing the training****course. All certificates must include:**1. **Title of the Course as submitted to the WV Department of Environmental Protection (WVDEP)**
2. **A space for the course number issued by the WV DEP (UST);**
3. **A space for the participant's name and UST Certification number;**
4. **The number of hours to be credited to participants, and**
5. **The date and location of the training course.**
 |
| **D. DATES, TIMES AND LOCATIONS OF COURSE****Provide the proposed dates, times and locations of the course addressed in this application.** |
| **Date (Month, Day & Year)** | **Time (Start to Finish)** | **Location (City & State)** |
| **Date (Month, Day & Year)** | **Time (Start to Finish)** | **Location (City & State)** |

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| Date (Month, Day & Year) | Time (Start to Finish) | Location (City & State) |
| Date (Month, Day & Year) | Time (Start to Finish) | Location (City & State) |
| **E. COURSE CREDIT HOURS**Indicate the total number of credit hours being requested for this course: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Note: The number of credit hours will be reviewed and approved by WVDEP. |
| **F: CERTIFICATION**I certify that the technology or methods that will be presented in the training course addressed in this application, and all attachments hereto, will satisfy the WV Department of Environmental Protection, UST Unit rules, and the state and federal laws governing the installation, repair, retrofit, upgrade, closure and/or change-in-service, tank and/or piping tightness testing, corrosion protection installation and testing.Signature: |
| Date: |   |
|   |
| Name and Title of Person Authorized to Sign for Organization |
| 1. **VERIFICATION OF ATTENDANCE**

Describe the method to be used to verify participant's attendance at all sessions of thetraining course. Attach the documents to be used for this purpose. |
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| 1. **COURSE INSTRUCTORS**

Provide the name(s) of the individual(s) that will be instructing the training course andlist their credentials. |
| Instructor Name: |
| Credentials: |
| Instructor Name: |
| Credentials: |
| Instructor Name: |
| Credentials: |
| Instructor Name: |
| Credentials: |

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**I. COURSE SESSIONS**

Complete the information below for each session. If you cannot list all sessions on this application, you may use a supplementary sheet. Attach copies of all documents to be distributed to persons attending the course.

Training Material to be used (List reference document, files, etc.)

Session Topic

Time Allotted for Session

Name of Instructor

Description of
Information to be
presented in session

Session Topic

Time Allotted for Session

Name of Instructor

Description of
Information to be
presented in session

Training Material to be used (List reference document, files, etc.)

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| **I. COURSE SESSIONS CONTINUED** |
| Session Topic | Description of Information to be presented in session | Training Material to be used (List reference document, files,etc.) |
| Time Allotted for Session |
| Name of Instructor |
| Session Topic | Description of Information to be presented in session | Training Material to be used (List reference document, files,etc.) |
| Time Allotted for Session |
| Name of Instructor |
| Session Topic | Description of Information to be presented in session | Training Material to be used (List reference document, files,etc.) |
| Time Allotted for Session |
| Name of Instructor |

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**ADDITIONAL INFORMATION:**

**Responsibilities of Course Provider:** Course providers shall maintain an attendance record of those individuals who have successfully completed the course and test for at least three years from the date when the course was held. The attendance record shall include the course name, the course identification number, the date the course was held, the name of each attendee, and the attendee's facility location information. ***Course providers are required to report the attendance record to WVDEP upon request.***

**Course Certificates:** Certificates MUST contain the course title, number of hours of continuing education credit as approved by WVDEP, the WVDEP provided course number, participant's name and UST certification number(s), and the date and location of the training. **If the certificates do not contain all of the above-mentioned information, the course will not be accepted for WVDEP UST Worker continuing education.**

**Approved courses:** When the course is approved, notification of approval will be sent to the course provider and all approved UST operator training courses will be posted to our website.

**Renewal:** Continuing education courses will be approved for a maximum period of five years. Should there be significant changes to federal or state UST Rules or state rules governing worker certification, WVDEP reserves the right to require that courses reapply for approval on a more frequent schedule. Approved courses and/or tests must be re-submitted for review at least 60 days before approval expiration date. **It is the course provider's responsibility to resubmit an application to WVDEP for course approval. WVDEP will not notify the course provider of the need to reapply prior to or upon expiration of the course approval.**

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