



**Board for Waste Management Facility Operators
 TRAINING COURSE APPROVAL APPLICATION
 No Fee Required**

A check or money order payable to the **TREASURER OF VIRGINIA**,
 or a completed [credit card insert](#) must be mailed with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.

1. Do you currently have an existing registration number with Department of Professional and Occupational Regulation or the board for Virginia Waste Management Facility Operators?

No

Yes If yes, provide your existing Provider Registration Number:

2. Training Provider/Business or Sole Proprietor Name _____

➤ A sole proprietor should enter his/her full legal name and the company name should be entered below as the Trade/DBA name. All names must be the same as the name on your government issued ID or organization/business documents.

3. Trade, "Doing Business As" (DBA) or Fictitious Name _____

▲ Attach a copy of the certificate filed with the Clerk of the Court in the locality where business will be conducted (if required by the locality).

4. A. Type of business entity (select only **one**)

Sole Proprietorship General Partnership Solely Owned LLC ♦ Other, please specify: _____

Corporation ♦ Limited Partnership ♦ Limited Liability Company ♦ _____

Other: Association, Business Trust, Government Agency, Joint Venture, Limited Liability Partnership, Non Profit, Professional Corporation, Professional Limited Liability Company, or Sole Proprietor (Non-Broker Owned)

B. State Corporation Commission Number: _____ (If applicable)

♦ If your business is a **corporation, limited liability company, or limited partnership**, your business/trade name(s) must be registered with the Virginia State Corporation Commission (including all out-of-state businesses). Firm/Businesses shall be organized as business entities under the laws of the Commonwealth of Virginia or otherwise authorized to transact business in Virginia. Firm/Businesses must register any trade or fictitious names with the State Corporation Commission or the clerk of court in the county or jurisdiction where the business is to be conducted. For additional information, contact the SCC at www.scc.virginia.gov or by phone at (804) 371-9733.

5. Provide **one** of the following identification numbers*:

Business Federal Employer Identification Number (FEIN)

-
 Federal Employer Identification Number (12-3456789)

Sole Proprietor's/Individual's Social Security Number **or**

- -
 Social Security or Virginia DMV Number (123-45-6789)

Virginia Department of Motor Vehicles Control Number

* State law requires every applicant, *who is not a sole proprietor or solely owned LLC*, to provide a federal employer identification number. *Sole proprietor or solely owned LLC* who do not have a FEIN must provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

➤ Provide the same identification number as used on previous applications or licenses on file with the department.

| OFFICE USE ONLY | DATE | FEE | TRANS CODE | ENTITY # | FILE #/LICENSE # | ISSUE DATE |
|-----------------|------|-----|------------|----------|------------------|------------|
| | | | 1020 | | 4606 | |

6. Mailing Address (PO Box accepted) _____
 The mailing address will be printed on the license. _____
 City State Zip Code

7. Street Address (PO Box not accepted) _____
PHYSICAL ADDRESS REQUIRED _____
 Check here if Street Address is the same as the Mailing Address listed above.

 City State Zip Code

8. Contact Numbers _____
 Primary Telephone Alternate Telephone Fax

9. Email Address _____
 Email address is considered a public record and will be disclosed upon request from a third party.

10. Contact Person Name and Title _____
 Name Title

11. Contact Person's Telephone Numbers _____
 Primary Telephone

12. Course Title _____

13. Type of Course to be offered: (Select all that apply)
 Pre-license Training Course *or* Continuing Education Course

14. The course attendees will be trained for which license classification? (Only one course approval per application.)
 Class I Class II Class III Class IV

15. Method of Instruction (Select all that apply)
 Classroom Correspondence
 Online Other Distance Learning (describe): _____

16. How many contact hours will the course offer? _____

17. Will this course be offered more than one time?
 No If no, provide the scheduled course date: _____
 Yes If yes, provide the date and time the course(s) will be offered: _____

18. Location(s) where course(s) will be taught:

19. Instructor Information: Attach a resume for each instructor listed below to include, but not limited to their education, training background, and a list of other appropriate trade designations or training certifications.

| Instructor's Name | License No (if applicable) | Phone Number | Resume Attached? |
|-------------------|----------------------------|--------------|------------------------------|
| | | | <input type="checkbox"/> Yes |
| | | | <input type="checkbox"/> Yes |
| | | | <input type="checkbox"/> Yes |

20. How will satisfactory completion of this course be determined? (Select all that apply)
 Attendance Site Visits

Examination Skill Demonstrations
Others Please list: _____

21. *I, the undersigned, certify that the foregoing statements and answers are true, and that I have not suppressed any information that might affect the Board's decision to approve this application.*

Print Name of Contact Person _____

Signature of Contact Person _____ Date _____

Required Attachments

The following attachments must be provided for each course. Please include a spacer page to label each attachment according to the numbers listed below.

- **Attachment # 1: Course Syllabus** - The course syllabus lists the purpose of the course and the main topics covered in the course. This includes any specific code sections to be discussed in the continuing education course. Vocational training courses should include a detailed curriculum for the training program. Backflow prevention device worker vocational training programs must include instruction in a wet lab as part of the syllabus.
- **Attachment # 2: Instructor Information** - List all instructors for the course with applicable Virginia Tradesman, Individual Certification, or Contractor license numbers (if available). In addition, a one-page resume with appropriate teaching and technical experience must be included for each instructor.
- **Attachment # 3: Course Materials and Fees** - Information pertaining to any materials used or distributed during the course, including books, handouts, pamphlets, and slide presentations/overheads. If the materials are "custom" information, i.e. developed by the provider, please provide a copy. If you will be using materials developed by an outside source, please provide detailed information about the publication. A copy of the materials may be requested. Please provide the fees that will be assessed for the course and whether or not the fees include any materials for the course and, if not, the materials that students are required to furnish.
- **Attachment # 4: Schedule of Course Dates and Locations** - Provide information pertaining to the anticipated schedule and location(s) for the course. If you have not developed a schedule, please provide an anticipated start date for the program. Please note that you must provide the Board office with a final schedule and location(s) prior to holding the class.
- **Attachment # 5: Course Completion Certificate** - If students will be provided with a certificate of completion at the end of the course, please provide a copy marked "sample."
- **Attachment # 6: Online/Correspondence Course Information** - If an online or correspondence course, please provide information on the security procedures to be utilized. In addition, provide information on the test that will be given at the end of the course and security related to the test. Online providers must provide the website address, user ID, and password to be utilized by the Board during the review process in order to access your course. Correspondence course providers must provide a copy of the packet that will be distributed to students.