

Waterworks Operator

DECLARATION OF SELF-PACED TRAINING EXAMINATION MONITORING

PLEASE DO NOT USE STAPLES

Both the examination monitor and the student must complete this Declaration of Self-Paced Training Examination Monitoring form for each Self-Paced Training course examination. After the student receives course completion verification from the course sponsor, the completed declaration and Water Works Self-Paced Training Submittal Form and required attachments must be submitted by

\bowtie	submittalsWCS@greenriver.edu
= n	Washington Certification Services Green River College 1221 D Street NE Auburn, WA 98002

	XAMINATION MON	ITOR DECLARATION	ON	
To be completed and signed by Exam Monitor only				
I have read, understand, and followed the Department of Heal course on the dates listed, and that the student named below				nally monitored the examination/s for the following
Student Name (Please Print)				
Course Title				
Course Sponsor				
Examination Date/s		Examination Location		
Exam Monitor Name (Please Print)				
Delationship to Student				
Relationship to Student				
Exam Monitor's Employer				
Job Title		Business Phone		
Address 1		Address 2		
City	Zip Code		State	
Exam Monitor Signature				Date
	STUDENT D	ECLARATION		
	OTOBENT DI			
To be completed and signed by student only				

I have read, understand, and followed the Department of Health's Self-Paced Training Approval and Examination Procedure. I certify that I personally completed the course listed above and
that my work was based solely on my own personal efforts. I also certify that I have personally completed the examination/s in the presence of the examination monitor listed above without
assistance from any source except as listed in the procedure. Student

nt Name (Please Print)	Washington Waterworks Operator Certification Number
Student Signature	Date

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