



FAX TO 807-223-8426 OIT

Fields marked with an asterisk (*) are mandatory.

Instructions

Complete this form to register for any water or wastewater certification examination. If applying for an Operator-in-Training (OIT) exam, you may also request to have your OIT certificate(s)/licence(s) issued using this form. To apply for a Class I to IV drinking water certificate or wastewater licence, Water Quality Analyst or limited subsystem certificate please complete the Drinking Water Certificate and Wastewater Licence Application Form (Form 2136).

Submit to the Ministry, care of the Ontario Water Wastewater Certification Office (OWWCO). Please submit your application in one of the following ways:

1. Mail: Ontario Water/Wastewater Certification Office (OWWCO)
 302 The East Mall, Suite 600
 Etobicoke ON M9B 6C7

2. Fax: 416 231-2107

For questions please contact an OWWCO representative at info@owwco.ca, 416 231-2100 or 1 877 231-2122

To order study material(s) please complete and submit the Study Manual Order Form,

Proof of Grade 12 completion or equivalent (GED) is required with this application form for those applicants who currently do not hold an OIT or Class 1 to 4 certificate/licence.

Part A - Applicant Verification and Consent

By signing this Examination Registration Form, I hereby consent to the collection, use, and disclosure of my personal information contained in this Examination Registration Form by the Ministry of the Environment and Climate Change and its Certification Program Administrator for the purposes of examination registration, issuance/renewals/upgrades of certificates/licences and enforcement as set out in this form. I further declare that all information in this application is true and correct and that I understand it is an offence under the *Ontario Water Resources Act* and the *Safe Drinking Water Act, 2002* to provide false information.

Signature of Applicant *	Date (yyyy/mm/dd) *
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Part B - Personal Information

Last Name *		First Name *		Middle Initial
Operator ID		Email Address *		
Home Address				
Unit Number	Street Number	Street Name		PO Box
City/Town *		Province *		Postal Code *
Home Phone Number *	Cell Phone Number *	Please indicate how you prefer to be contacted: *		
Name of Employer (if applicable)		<input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail (Canada Post) <input type="checkbox"/> Home Phone <input type="checkbox"/> Cell Phone		
		Business Phone Number ext.		

Part C - Examination Type

- Operator-in-Training Examination
- Class I to IV, Limited Subsystem and Water Quality Analyst Examination

Operator-in-Training Examination Registration

The Operator-in-Training Examination Registration form is used for applying to write any or all of the following Operator-In-Training (OIT) examinations:

- Water Treatment
- Water Distribution/Distribution and Supply
- Wastewater Treatment
- Wastewater Collection

Please note that the Water Distribution OIT exam and the Water Distribution and Supply OIT exam are the same.

Part D - Operator-in-Training Examination Information

This application form must be received at **least 4 weeks** prior to the scheduled examination date. Please see the Exam Schedule for locations and dates for Program Administrator site exam sessions.

In order to cancel/reschedule or alter your examination request you must inform the Ontario Water Wastewater Certification Office in writing, **two weeks** prior to the scheduled examination date or your request will be denied. The examination application fee is non-refundable. You may reschedule an examination twice free of charge, examinations may not be rescheduled a third time. If you do not write an examination on the second reschedule date, to write the examination you must submit a new application along with the required payment.

Select the language for your examination(s) * English French

You have the option of writing 1, 2, 3, or 4 OIT examination modules (water treatment, water distribution/distribution and supply, wastewater treatment and/or wastewater collection); regardless of the number of modules the fee is \$50.

Select your examination module(s):*

Water Treatment Water Distribution/Distribution and Supply Wastewater Treatment Wastewater Collection

Examination results are sent to your personal email address on file. To receive examination result by regular mail check here

Examination Session Type *

Program Administrator Site (OWWCO) College Site

Part D1 - Program Administrator Site (OWWCO)

Complete this section if you are requesting to write an examination at a scheduled Program Administrator's site:

Site Name (see Exam Schedule) *

Examination Date (yyyy/mm/dd) *

Part E - Certificate/Licence Request

Would you like to request the issuance of OIT certificate(s)/licence(s) upon a passing grade on the examination(s): * Yes No

Please check the box () for the type of OIT certificate(s)/licence(s) for which you are applying: *

Water Treatment Water Distribution/Distribution and Supply
 Wastewater Treatment Wastewater Collection

Part F - Check List

Prior to submitting this application you **must** enclose and check off the requirements of this application to verify your application is complete.

- Proof of Grade 12 or equivalent (GED)
- Payment Enclosed *
- Your signature to verify the information provided. *

Personal information provided on this form is collected by the Ontario Water Wastewater Certification Office (OWWCO) on behalf of the Ministry of the Environment and Climate Change in accordance with the *Safe Drinking Water Act*, 2002 S.O. 2002, c. 32, as amended (SDWA) and Ontario Regulation 128/04 and the *Ontario Water Resources Act*, R.S.O. 1990, c. O.40, as amended (OWRA) and Ontario Regulation 129/04. The collection, use and dissemination of this information are governed by the *Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c. F.31, as amended (FOIPPA).

The information gathered herein will be used for the principle purpose of assessment and verification of eligibility for, and issuing of, a drinking water operator certificate, a wastewater licence or a water quality analyst certificate; as well as for secondary purposes including reporting, investigating and law enforcement under the aforementioned Acts and regulations (including the *Health Protection and Promotion Act*, O. Reg. 318/08, O. Reg. 319/08, and the use by the Ministry of the Environment and Climate Change's Investigations and Enforcement Branch). Information contained on this Examination Registration form, with the exception of payment information may be disclosed to other government agencies (including municipalities, public health unit employees, the Walkerton Clean Water Centre, Ministry of Health and Long Term Care and Ministry of Natural Resources) pursuant to "section 42" of FOIPPA for the consistent purpose of administering the OWRA and the SDWA that pertains to drinking water and safety.

Part G - Payment InformationPlease make cheques or money orders payable to the **MINISTER OF FINANCE**.

Total Payment Due

\$50.00

Payment Method *

 Cheque(s) VISA MasterCard Money Order(s)

Card Holder's Name

VISA / MasterCard Number

Expiry Date (mm/yy)

Card Holder's Signature

Date (yyyy/mm/dd)

Phone Number

ext.

Receipt Information

Send Receipt

To: Same as Part BBy: * Email Regular Mail (Canada Post)

Last Name *

First Name *

Middle Initial

Unit Number

Street Number

Street Name

PO Box

City/Town *

Province *

Postal Code *

Email Address *