

APPLICATION FOR INDIVIDUAL ASBESTOS ACCREDITATION

Maryland Department of the Environment



First _____ MI _____

Last _____

Address _____

City _____ State _____ Zip _____

Phone # _____

SSN _____ Date of Birth ____/____/____

Employer _____

Email _____

Course Title _____

Training Provider _____

TP Address _____

City _____ State _____ Zip _____

Training Provider Phone # _____

Certificate # _____

Course Date _____ Exp. Date _____

MDE Exam Test Date and Time: ____/____/____

Circle: 10 AM

2PM

SELECT EXAM:

- ☐ Project Designer
- ☐ Inspector/Management Planner
- ☐ Inspector
- ☐ Supervisor

- ☐ Worker English
 - ☐ **Read** in English
- ☐ Worker Spanish
 - ☐ **Read** in Spanish

YOU WILL NOT BE ADMITTED UNLESS YOU HAVE THE FOLLOWING:

Payment- **\$60.00 EXACT** amount in cash, a money order, or check payable to “*Maryland Clean Air Fund*”

Valid Photo Identification-
(Examples: US Drivers License, ID Card, Passport, or Military ID)

OFFICE : PCA 13729 AOBJ 5698

Original Course Certificate - You must bring the original (most recent) certificate.

Applicant must **arrive 45 minutes before** exam begins. **Doors will close** 15 minutes before exam begins. I understand that I cannot use electronic devices (to include cellular phones) during the exam.

Registration begins at 8:30am for 10am exam & 12:30pm for 2pm exam. There will be no lockers to secure personal belongings. Exam administrators and proctors will be unable to hold personal belongings and are not responsible for any lost or stolen items.

Signature: _____

Date: _____

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