



CODES & STANDARDS
CONFORMITY ASSESSMENT

QHO Provisional Certification Application Form

Name: _____ Last 6 digits of Social Security # _____
Address: _____ Email: _____
_____ Phone: _____
_____ Fax: _____

The applicant affirms that he/she meets all of the relevant requirements and qualifications in the *ASME QHO-1 Standard for the Qualification and Certification of Hazardous Waste Incinerator Operators*. See the Applicant Information brochure for the eligibility requirements for taking the General Examination. ASME will notify the applicant regarding the disposition of this application at the address or email shown above.

Education

All applicants must fill in (1). Also fill in (2) and/or (3), where applicable. For all items, please attach a copy of your diploma, if available. All information is subject to future verification.

(1) High School Diploma Yes No Year Graduated: _____
High School : _____
Location: _____

(2) High School Equivalency Diploma Year Issued: _____
Issued by: _____

(3) College Degree: _____ Year Graduated: _____
College/Institute: _____
Location: _____

Training

Indicate whether the following required training for Provisional Certification has been completed as explained in the Applicant Information brochure. Also describe how this was accomplished (e.g. "In-plant training at XYZ facility," or "Classroom instruction at XYZ institute").

- (1) Basic Hazardous Waste Facility Training (see Table 2)

Yes No

Describe: _____

- (2) Basic Hazardous Waste Incineration Training (see Table 3)

Yes No

Describe: _____

- (3) Hazardous Waste Incineration Training (see Table 4)

Yes No

Describe: _____

The undersigned warrants that all representations contained in this application are true.

Applicant's Signature

Date