



Illinois EPA – Operator Certification BOW/CAS#19 1021 North Grand Avenue East, PO Box 19276 Springfield, Illinois 62794-9276 Telephone 217-785-0561

OPERATOR TRAINING FORM

Operator Name (*please print*)

Water Operator 9-digit ID Number (not Social Security Number)

*Course ID Number	Name of Company or Orga	anization Providing Training	Course Training Name	
18490	IRWA / U.S. EPA, Chris Frey/Sarah Mazur (Office of Research and Development), Chris Lee (Office of Environmental Justice), Alan Walts (Region 5), Helen Serassio (Office of General Council) / Ann Wolverton Center for Environmental Economics, Office of Policy		DWT Cumulative Impact Assessment: Research/Regulatory Activities at EPA	
Date(s) of Training 03/14/2023	Hours/Minutes 1 hour / 00 minutes	City (Where Training Occurred) Live Webinar - https://us02web.zoom.us/webinar/register/WN_KbF5j5-YTq6BCfG6hcwYwQ		
from several EPA offices v		mpacts into research, policy, law, and decision ma	ch and development will moderate a panel of representatives king. Each panel member will give brief remarks followed	

*Effective 7/1/2012, you must include Course ID Number on this form or it will be returned. Until 7/1/2012, if not known, leave blank.

I certify that the above information is true and accurate and that I have successfully completed the above listed training. I understand that proof of training records must be maintained by me for a period of four years. I further acknowledge that falsification of this form or any form used in the certificate renewal process may result in denial of certificate renewal or restoration and is a cause of certificate revocation and/or suspension. Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h))

	D	
Signature:	Date:	Davtime Phone: