



**Illinois
Environmental Protection Agency**



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 21003	Name of Company or Organization Providing Training IRWA/U.S. EPA Office of Water - James Hogan		Course Training Name DWT PFAS Primary Drinking Water Regulation
Date(s) of Training 09/24/2024	Hours/Minutes 30 minutes	City (Where Training Occurred) Live Webinar - https://us02web.zoom.us/webinar/register/9717110675247/WN_0zwugHskSJ-bmgltDE0gDA#/registration	
Provide summary of drinking water related training: This presentation will provide attendees information on the PFAS National Primary Drinking Water Regulation: initial monitoring requirements and EPA-State Implementation Workgroup.			
*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.			

*Course ID Number 21004	Name of Company or Organization Providing Training IRWA/U.S. EPA Office of Water - Will Adams		Course Training Name DWT PFAS Analytical Methods
Date(s) of Training 09/24/2024	Hours/Minutes 30 minutes	City (Where Training Occurred) Live Webinar - https://us02web.zoom.us/webinar/register/9717110675247/WN_0zwugHskSJ-bmgltDE0gDA#/registration	
Provide summary of drinking water related training: This presentation will provide attendees information on EPA drinking water PFAS analytical methods and the PFAS National Primary Drinking Water Regulation.			
*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.			

*Course ID Number 21005	Name of Company or Organization Providing Training IRWA/ Arizona Department of Environmental Quality - Sara Konrad	Course Training Name DWT Proactive PFAS Grant Funding
Date(s) of Training 09/24/2024	Hours/Minutes 30 minutes	City (Where Training Occurred) Live Webinar https://us02web.zoom.us/webinar/register/9717110675247/WN_0zwugHskSJ-bmgltDE0gDA#/registration
Provide summary of drinking water related training: This presentation will provide attendees information on implementing a proactive PFAS program using "Emerging Contaminants in Small or Disadvantaged Communities" Grant funding.		
*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.		

*Course ID Number 21006	Name of Company or Organization Providing Training IRWA/ California State Water Resources Control Board - Erica Kalve	Course Training Name DWT ET Broad-Spectrum PFAS Study
Date(s) of Training 09/24/2024	Hours/Minutes 30 minutes	City (Where Training Occurred) Live Webinar https://us02web.zoom.us/webinar/register/9717110675247/WN_0zwugHskSJ-bmgltDE0gDA#/registration
Provide summary of drinking water related training: This presentation will provide attendees information on ET Broad-Spectrum PFAS Study to characterize the class of PFAS in California.		
*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.		

*Course ID Number 21007	Name of Company or Organization Providing Training IRWA/ Minnesota Department of Health - Alycia Overbo	Course Training Name DWT Communicating Risks/Engaging Communities on PFAS
Date(s) of Training 09/24/2024	Hours/Minutes 30 minutes	City (Where Training Occurred) Live Webinar https://us02web.zoom.us/webinar/register/9717110675247/WN_0zwugHskSJ-bmgltDE0gDA#/registration
Provide summary of drinking water related training: This presentation will provide attendees information on communicating risks and engaging communities on PFAS.		
*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))

Signature: _____

Date: _____

Daytime Phone: _____