

**APPLICATION FOR EXAMINATION:  
MINE SAFETY INSTRUCTOR**

**MINIMUM APPLICATION REQUIREMENTS:**

1. A citizen of West Virginia, in good health, not less than twenty-four (24) years old, of **good character and reputation, and of temperate habits**; and,
2. A person who has practical experience with dangerous gases found in a coal mines; and who has good theoretical and practical knowledge of mines, mining methods, mine ventilation, sound safety practices and applicable mining laws and rules; and
3. A person who possesses a WV foreman/fireboss certification; or a person who has had at least three (3) years of experience as an actual working team member of a mine rescue team, or at least three (3) years of experience as a member of a first aid team or emergency medical technician team; or a person who has had at least three (3) years of experience as the safety director, or the equivalent approved by the Board of Coal Mine Health and Safety; or a person who has had at least three (3) years of experience as an active member of a mine safety committee.
4. Five (5) years of full-time or part-time practical experience\* in coal mines, at least two (2) years of which must have been in mines of this state, provided, that graduation from an accredited college of mining engineering may be considered the equivalent of two (2) years practical experience.
5. Must have a valid West Virginia driver's license.

\* Practical experience means the performance of normal mining duties requiring a person to hold a certificate of competency and qualification as an experienced miner prior to actually performing such duties.

If you meet these minimum requirements, **you must attach official documentation from your employer(s) detailing your years of coal mining experience and the occupation(s) or classification(s) at which you were employed**, beginning with your current employer and position or your most recent employer and position if you are not currently employed in the coal mining industry.

If the minimum requirements are not met by the applicant and/or the requested information and documentation is not provided by the applicant, the application will be considered insufficient by the Board of Coal Mine Health and Safety and the applicant will not be eligible to be added to the respective register for employment consideration with the Office of Miners' Health, Safety and Training.

Mail the properly completed paperwork and **notarized** application to the following address:

**Board of Coal Mine Health & Safety  
106 Dee Drive  
Charleston, West Virginia 25311  
ATTN: Mallory Yates**

APPLICANT INFORMATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Valid WV Driver's License Number: \_\_\_\_\_

Current Address: \_\_\_\_\_

Current Physical Address (if different from above): \_\_\_\_\_

Current Telephone Number: (     ) \_\_\_\_\_

How long have you resided at this address? Years: \_\_\_\_\_ Months: \_\_\_\_\_

Previous Address: \_\_\_\_\_

How long did you reside at this address? Years: \_\_\_\_\_ Months: \_\_\_\_\_

Current Email Address: \_\_\_\_\_

**Have you been convicted of a felony? \_\_\_\_ Yes \_\_\_\_ No. If yes, please explain:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

EDUCATION

Did you receive a high school diploma or high school equivalency diploma (GED)? \_\_\_\_ Yes \_\_\_\_ No

Mark highest grade completed: \_\_1\_\_ \_\_2\_\_ \_\_3\_\_ \_\_4\_\_ \_\_5\_\_ \_\_6\_\_ \_\_7\_\_ \_\_8\_\_ \_\_9\_\_ \_\_10\_\_ \_\_11\_\_ \_\_12

<p><b>Additional Education:</b> All academic training, other than high school or GED, must be verified. Verification of academic training may be in the form of an <b>official transcript</b>, copy of <b>diploma</b> or <b>certificate</b>, or <b>written statement</b> from an authorized agency verifying possession of the necessary credentials</p>							
School Name and Address	Field(s) of Study		Credit Hours		Dates of Attendance		Type of Degree
	Major	Minor	Sem.	Quar.	Mo/Yr.	Mo/Yr.	
College (Undergraduate)							
College (Graduate)							
Business, Vocational, or Technical School							
Additional Training, (Semesters, Military Trng., Workshops, Etc.)							
<b>Military Service:</b>			<b>Type of Discharge:</b>				

**APPLICANT INFORMATION**

In the space below, list any related licenses and certificates. (Verification copies must be provided.) If you have a Commercial Driver's License (CDL), enter your License Number, CDL License Class, and Expiration Date.

What permissible gas detecting instruments do you have experience in using?

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**REGIONAL OFFICES**

Select a <b>Region</b> in which you will definitely accept employment. Mark <b>ALL</b> regions only if you are willing to accept employment in any region and be willing to relocate							
<input type="checkbox"/>	<b>Region 1 Westover</b>	<input type="checkbox"/>	<b>Region 2 Welch</b>	<input type="checkbox"/>	<b>Region 3 Danville</b>	<input type="checkbox"/>	<b>Region 4 Oak Hill</b>
Barbour	Monongalia	McDowell	Boone	Braxton			
Berkeley	Morgan	Mercer	Cabell	Clay			
Brooke	Ohio	Monroe	Lincoln	Fayette			
Calhoun	Pendleton	Summers	Logan	Greenbrier			
Doddridge	Pleasants	Wyoming	Mason	Jackson			
Gilmer	Preston		Mingo	Kanawha			
Grant	Randolph		Putnam	Nicholas			
Hampshire	Richie		Wayne	Pocahontas			
Hancock	Taylor			Raleigh			
Hardy	Tucker			Roane			
Harrison	Tyler			Webster			
Jefferson	Upshur						
Lewis	Wetzel						
Marion	Wirt						
Marshall	Wood						
Mineral							
Mark only if available in <b>ALL</b> regions			<input type="checkbox"/>	<b>AN EQUAL OPPORTUNITY EMPLOYER</b>			

**Identification:** When reporting for an examination, you must present identification which includes a signature and/or picture (ex.: driver's license, social security card, credit cards, and passport).

APPLICANT INFORMATION

**Affirmation:** I certify under penalty of law and disqualification that all statements are true and complete. I authorize the WV Board of Coal Mine Health and Safety and the Office of Miners' Health, Safety and Training to conduct an inquiry into any job-related information contained in this application. I release the WV Board of Coal Mine Health and Safety and the Office of Miners' Health, Safety and Training from any and all liability by reason of the request for such information. I further authorize and request each former employer, educational institution, or organization (including law enforcement agencies) to provide all information that may be sought in connection with this application.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

You must attach official documentation from your employer(s) detailing your years of practical coal mining experience and the occupation(s) or classification(s) at which you were employed, beginning with your current employer and position (or your most recent employer and position if you are not currently employed in the coal mining industry). Please use additional pages as necessary.

Employer Name and Address		Employer Phone Number
Name of Supervisor	Your Title	Employment Dates From:                      To:
Detailed Description of Your Duties and Responsibilities		

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Detailed Description of Your Duties and Responsibilities		

APPLICANT INFORMATION

AFFIDAVIT OF APPLICANT

I, \_\_\_\_\_, do hereby affirm that I am a resident of West Virginia. I currently have \_\_\_\_\_ years and \_\_\_\_\_ months of practical coal mining experience, at least two (2) years of which have been in coal mines in this state. I affirm that I am in good health and that the statements and information recorded in this application are true and accurate to the best of my knowledge. I agree that if an appointment to the position of mine safety instructor is offered and accepted, I will accept initial assignment or a later transfer to any location in the State of West Virginia as designated by the Director of the West Virginia Office of Miners' Health, Safety and Training, pursuant to § 22A-1-4(b)(3) of The West Virginia Code.

\_\_\_\_\_  
**Applicant's Signature**

STATE OF WEST VIRGINIA

COUNTY OF \_\_\_\_\_ TO WIT:

Acknowledged, subscribed and affirmed before me in my said county, this \_\_\_\_\_ day of

\_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
**Notary Public**

My Commission Expires \_\_\_\_\_,

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**NOTE: If you are placed on the register for employment, you must indicate in writing annually (every year) as to your continued availability for employment. Failing to comply could result in your being removed from the register as per WV Code §22A-9-1(4).**