Attach recent photograph



Registration No	
Certification No	
Classification	
Date issued	

State of West Virginia Office of Miners' Health, Safety and Training 1615 Washington Street, East

1615 Washington Street, East Charleston, WV 25311-2126 Web: www.wvminesafety.org

ipproved t	у	
Date Ann	roved:	

Complete Sections 1-4

SHAFT and SLOPE SUPERINTENDENT and SHAFT and SLOPE EXAMINER FOREMAN APPLICATION

SI	HAFT and SLOPE EX	<u>XAMINER FO</u>	<u>OREMAN</u>	APPLICATION	
Section 1					
Name					
Last	Fir	rst		Middle	
Address				DI	
Street or Box	City	State Zi	.p	Phone	
Date of Birth//	SSN (Last 4 Digits)	W	V Miners Cer	rtificate No	
Total shaft/slope experience		orking place exper	ience	months.	
(Show dates of employment in Sect Are you a graduate of an accred		.ool? yes/no	If yes attach	a copy of your degree to the	nis application.
Section 2		If addition	al space is ne	eeded use separate sheet (of paper
	SHAI	FT/SLOPE EXP	ERIENCE		
		Years of			
Company and Mine	Address	Experience	Da	ates of Employment	Duties
1)			/ Month	/_ to/ / /Day/Year Month/Day/Yea	- ır
2)			/ Month	/ to / / /Day/Year Month/Day/Yea	- ur
3)				to/ /Day/Year Month/Day/Yea	
4)			/	/ to / /	
			Month	/Day/Year Month/Day/Yea	ır
Date	<u> </u>	Si	gnature of Ap	pplicant	
Section 3					
State ofCounty of					
Subscribed and sworn before m	e, a Notary Public in and for	r this day	of	, 20	·
My commission expires					
(Notary Seal)			gnature of No	otary Public	

22A-2-21(d) Whoever knowingly makes any false statement, representation, or certification in any application, record, report, plan or other document filed or required to be maintained pursuant to this law or any other or decision issued under this law shall be guilty of a misdemeanor, and, upon conviction thereof, shall be fined not more than \$5,000.00 or imprisoned in the county jail not more than six months, or both fined and imprisoned.



<u>Section 4</u> – To be completed by company official verifying mining experience

This is to certify that with this company, of which	has h months were on or at a	ad years and/or working section.	months of shaft/slope experien
Coal Company / Mine Employment Dates:/ Month /Day,			al of Co. Official certifying experience
State of		Telephone Number	
County of			
	bed and sworn before me, a Notary Public		
(Notary Seal)		Signature of Notary Public	
This is to certify that with this company, of which	has	ad years and/or working section.	months of shaft/slope experien
Coal Company / Mine		Signature of Company Offici	al
Employment Dates:/ <u>Month /Day</u> ,		Printed Name/Title Telephone Number	of Co. Official certifying experience
State of		receptione Number	
County of			
	bed and sworn before me, a Notary Public		
(Notary Seal)		Signature of Notary Public	
This is to certify that with this company, of which	has h months were on or at a	ad years and/or working section.	months of shaft/slope experien
Coal Company / Mine		Signature of Company Offici	al
Employment Dates:/ Month /Day/	· ·	Printed Name/Title of Co. Of	fficial certifying experience
State of		Telephone Number	
County of			
	bed and sworn before me, a Notary Public		
(Notary Seal)		Signature of Notary Public	