SURFACE MINE FOREMAN EXAMINATION APPLICATION

Complete Sections 1-4

Section 1

Name __________________________________________________________________________________________

Last     First     Middle

Address __________________________________________________________________________________________

Street or Box City State Zip Phone

Date of Birth ____/____/____  Soc. Sec. No. (last 4 digits):___________________ WV Miners Certificate No. _________________

Total surface experience __________ years.                     Working pit experience ____________ months.

Are you a graduate of an accredited mining engineering school?  yes/no ___ . If yes attach a copy of your degree to this application.

SURFACE EXPERIENCE

Section 2

If additional space is needed use separate sheet of paper

<table>
<thead>
<tr>
<th>Company and Mine Name</th>
<th>Address</th>
<th>Years of Experience</th>
<th>Dates of Employment</th>
<th>Duties</th>
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<td>Month/Day/Year to Month/Day/Year</td>
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Date____________________________  _________________________________________________

Signature of Applicant

Section 3

Subscribed and sworn before me, a Notary Public in and for _________________________ County, State of__________________

this _____ day of _____________________, 20 ____.

_________________________________________________
                Notary Public

My commission expires : _________________________

Return completed form to the nearest West Virginia Office of Miners’ Health Safety and Training Regional Office or to the Regional Office where you plan to take the examination.
22A-2-21(d) Whoever knowingly makes any false statement, representation, or certification in any application, record, report, plan or other documents 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.

**Section 4 - To be completed by company official verifying mining experience**

This is to certify that __________________________ has had ___ years and/or ___ months of surface coal mining experience with this company, of which _______ months were on or at a working section.

Coal Company / Mine

Employment Dates: ___ / ___ / ___ to ___ / ___ / ___

Month/ Day/ Year    Month/ Day/ Year

State of __________________________

County of __________________________

Subscribed and sworn before me, a Notary Public this _______ day of ________________ , 20__

My commission expires __________________________

(Notary Seal)

Signature of Notary Public

This is to certify that __________________________ has had ___ years and/or ___ months of surface coal mining experience with this company, of which _______ months were on or at a working section.

Coal Company / Mine

Employment Dates: ___ / ___ / ___ to ___ / ___ / ___

Month/ Day/ Year    Month/ Day/ Year

State of __________________________

County of __________________________

Subscribed and sworn before me, a Notary Public this _______ day of ________________ , 20__

My commission expires __________________________

(Notary Seal)

Signature of Notary Public