

Attach recent photograph



Registration No. \_\_\_\_\_

Certification No. \_\_\_\_\_

Classification \_\_\_\_\_

Date issued \_\_\_\_\_

**State of West Virginia  
Office of Miners' Health, Safety and Training**

# 7 Players Club Drive – Suite 2

Charleston, WV 25311-2126

[www.wvminesafety.org](http://www.wvminesafety.org)

Approved by: \_\_\_\_\_

Date approved: \_\_\_\_\_

**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

	Company and Mine Name	Address	Years of Experience	Dates of Employment	Duties
1)				____/____/____ to ____/____/____ Month/Day/Year Month/Day/Year	
2)				____/____/____ to ____/____/____ Month/Day/Year Month/Day/Year	
3)				____/____/____ to ____/____/____ Month/Day/Year Month/Day/Year	
4)				____/____/____ to ____/____/____ Month/Day/Year Month/Day/Year	

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.

- **Region One** ▪ 14 Commerce Drive, Suite 1, Westover West Virginia 26501 ▪ Telephone 304-285-3268 ▪ Fax 304-285-3275
- **Region Two** ▪ 891 Stewart Street, Welch, West Virginia 24801-2311 ▪ Telephone 304-436-8421 ▪ Fax 304-436-2100
- **Region Three** ▪ 137 Peach Court - Suite 2, Danville, West Virginia 25053 ▪ Telephone 304-369-7823 ▪ Fax 304-369-7826
- **Region Four** ▪ 550 Industrial Drive, Oak Hill, West Virginia 25901-9714 ▪ Telephone 304-469-8100 ▪ Fax 304-469-4059



**SURFACE MINE FOREMAN APPLICATION  
BACK SIDE - PAGE TWO**

**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 month, or both fined and imprisoned.**

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

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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

\_\_\_\_\_  
Signature of Company Official

Employment Dates: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Month/ Day/ Year Month/ Day/ Year

\_\_\_\_\_  
Printed Name/Title of Co. Official certifying experience

State of \_\_\_\_\_

\_\_\_\_\_  
Telephone Number

County of \_\_\_\_\_

Subscribed and sworn before me, a Notary Public this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

My commission expires \_\_\_\_\_

(Notary Seal)

\_\_\_\_\_  
Signature of Notary Public

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\_\_\_\_\_  
Coal Company / Mine

\_\_\_\_\_  
Signature of Company Official

Employment Dates: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Month/ Day/ Year Month/ Day/ Year

\_\_\_\_\_  
Printed Name/Title of Co. Official certifying experience

State of \_\_\_\_\_

\_\_\_\_\_  
Telephone Number

County of \_\_\_\_\_

Subscribed and sworn before me, a Notary Public this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

My commission expires \_\_\_\_\_

(Notary Seal)

\_\_\_\_\_  
Signature of Notary Public

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\_\_\_\_\_  
Coal Company / Mine

\_\_\_\_\_  
Signature of Company Official

Employment Dates: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Month/ Day/ Year Month/ Day/ Year

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Printed Name/Title of Co. Official certifying experience

State of \_\_\_\_\_

\_\_\_\_\_  
Telephone Number

County of \_\_\_\_\_

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My commission expires \_\_\_\_\_

(Notary Seal)

\_\_\_\_\_  
Signature of Notary Public