



NAWT
National Association of Wastewater Technicians

2800 W. Higgins Ave
Suite 440
Hoffman Estates, IL 60169
1-800-236-NAWT (6298)
1-866-220-1055 Fax
info@nawt.org
www.nawt.org

NAWT Professional Training Program CERTIFICATE OF COMPLETION RENEWAL APPLICATION

DATE: _____ LOCATION: _____

COURSE TITLE: _____

COURSE PROVIDED BY: _____

THE CERTIFICATE THAT YOU ARE RENEWING

___INSPECTOR___ O&MI___ O&MII___ OTHER (*please specify*)_____

Name: _____

Company: _____

Business Address _____

Address (*Mail Certificate to*): _____

(*If Different than above*)

Business

or

Home

Contact Info:

Business Phone: _____ Cell Phone: _____

Fax: _____ Email: _____

NO, I do not want to be listed on the NAWT Inspector Web page
Unless you check this box you will be listed on the NAWT Web Registry

NOTE: Please write legibly and fill out the form completely as information contained on this sheet is used to send certificates and update the NAWT Web Registry.