



# Continuing Education Instruction Sheet for Provider and Syllabus Applications

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Thank you for your request to become a Continuing Education Provider or Instructor. These instructions provide the background on continuing education and help you complete the required forms.

Continuing education is an opportunity to gain knowledge in subjects that directly relate to the well drilling profession. It is designed to enhance the individual's knowledge and drilling skills. It also keeps drillers informed on technological advances and up-to-date on current state and local regulations. The goal is to ensure the highest quality of professionalism in the well drilling industry.

Continuing education is required of every person applying for an operator's license and for every licensed operator renewing their license. With few exceptions, drillers may only gain continuing education units from an approved continuing education provider.

## CONTINUING EDUCATION PROVIDER APPLICATION

A continuing education provider is any person, organization, school, or other entity. Providers use one or more instructors who administer driller education. All providers must receive Ecology approval for their continuing education plan and curriculum. Following approval, your continuing education plan remains on file indefinitely.

Each year, you will be required to update your curriculum and provide Ecology a current training schedule. Ecology will place your schedule on their website. The goal is to provide you maximum exposure and give drillers flexibility in meeting their training needs. Please refer to the **TRAINING SCHEDULE** section below.

Your continuing education plan must contain the following:

1) Contact information.

Contact information consists of the name of the person, organization, school, or other entity applying to become an approved continuing education provider. You must also provide a mailing address, telephone numbers, and email address (if available).

2) Statement of Qualifications.

A statement of qualifications consists of a summary of the provider's experience in providing educational programs and a list of references.

3) Statement of Organization.

A statement of organization contains all of the following:

- The number of workshops you intend to provide over the next 12 months.
- How the courses will be advertised.
- The number of classes offered at each workshop.
- When a completed agenda will be available.
- A description of the method to be used to evaluate courses.
- A description of how you will verify attendance and report it to Ecology
- A description of the type of proof of completion you will award each student.
- Your cancellation policy.

#### 4) Statement of Resources.

A statement of resources should identify the date, and the name and address of each facility you intend to use for each workshop. The form provides space for up to ten workshops in a twelve month period. Attach additional sheets, if necessary.

#### 5) Statement of Accountability.

The statement of accountability should justify the cost of the class or workshop. It also includes a statement assuring delivery of courses by the provider.

Please provide information on the enclosed form entitled "Continuing Education Provider Application".

- Ensure that you have answered all questions. Missing information may delay the processing of your application.
- The form must be signed by the person applying to become a provider or an authorized representative.

You must renew the provider application each year to remain an approved provider.

## **CONTINUING EDUCATION UNIT SYLLABUS**

Continuing education units (CEU) are earned by attending continuing educational programs. Continuing education programs consist of approved training, classes, courses, workshops, offerings, correspondence instructions, or other means of providing instruction. General topics include: Occupational health; safety; business and office skills; interpersonal skills; technical aspects associated with well design, construction, development, maintenance, or testing; geology and groundwater sciences, safety, welding, HAZMAT training, first aid. Ecology may also approve other topics directly related to well construction and the groundwater industry.

To evaluate your CEU program, you must provide the following information on the enclosed form, "Continuing Education Unit Syllabus". Make sure that you have answered all questions. Missing information can delay processing of your application.

- Instructor name and contact information.
- Instructor qualifications.
- Course title.
- The date and time of the course.
- Course length.
- Cost.
- A description of textbooks, supplemental readings, or materials such as safety equipment, calculators, or other items the attendee will need to provide.
- A description of what facility (ies) are going to be used for the workshop or class and driving directions.
- A course outline, showing the specific subject material to be taught, and the testing schedule.
- A statement regarding how this course will enhance the knowledge, skills, and abilities required in the drilling profession, including the goals and objectives of each class.
- A statement that the class will be open to all who wish to attend.
- A statement on the minimum number of students you need to put on the class.

## **TRAINING SCHEDULE**

In addition to the CEU Syllabus form, please supply a copy of your training schedule(s) for each workshop. Your training schedule should include class dates, times, class title, and workshop location(s). Ecology will use this information to update our CEU website, to provide drillers the most current information on future training opportunities. You must submit an annual revised training schedule, for Ecology's approval, in order to maintain your role as a continuing education provider.

## **HOW WILL PROGRAMS BE EVALUATED AND CONTINUING EDUCATION UNITS ASSIGNED?**

When evaluating programs and assign continuing education units, Ecology will use the following criteria:

1. The relevance of each subject to the business, technical, or regulatory aspects of well drilling.
2. How well the subject will enhance the knowledge, skills, and abilities required in the well drilling profession.
3. The length of the program.
4. Final group selection (see below).

Based on the syllabus review, each continuing education program is classified into one of the following seven groups:

**Group One** - Subjects that directly relate to the business, technical, regulatory, and safety aspects of well construction; and Subjects that enhance groundwater protection and increased professionalism within the drilling community.

- A. Washington regulations on well construction and licensing.
- B. Well design, construction methodology, development, maintenance, and testing.
- C. Groundwater protection.
- D. Hydrogeology and groundwater science.
- E. Equipment operation and maintenance.
- F. Computer skills.
- G. Welding.
- H. Business management and office skills.
- I. Interpersonal skills.
- J. Occupational health and safety.
- K. Map reading skills.
- L. Local and state health regulations.
- M. Department of Transportation regulations.

**Group Two** - Subjects related to groundwater.

**Group Three** - Subjects not covered under Group One or Two, but benefit the driller's professional development.

- A. Vender specific product/sales courses.
- B. Pumps.

**Group Four** - Miscellaneous courses

- A. Correspondence courses.
- B. Trade school courses that do not fall into another group.
- C. College courses that do not fall into another group.

**Group Five** - Conventions and trade shows.

- A. Washington Groundwater Association
- B. National Ground Water Association
- C. Pacific Northwest Expo
- D. Other state-recognized conventions

**Group Six** - Preapproved classes.

- A. OSHA HAZWOPPER 40-hour basic course - 20 units
- B. OSHA HAZWOPPER 8-hour refresher - 4 units
- C. Red Cross 8-hour first aid/CPR - 4 units
- D. Others, as approved by Ecology

**Group Seven** - Programs with no unit value.

Ecology assigns continuing educational units to programs based on the group that best describes the training session and the published length of the training session. The following is a unit value for each group:

Group One	One unit per hour
Group Two	One half unit per hour
Group Three	One quarter unit per hour
Group Four	One unit for each school credit. Only four continuing education units under this group may be credited per license renewal period or trainee applicant. No more than eight units for all other applicants.
Group Five	One unit per convention
Group Six	As listed
Group Seven	No unit value

Please direct questions to: Scott Malone  
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# Continuing Education Provider Application

Press F11 to move to input fields.

<b>Requester's Name: (Last, First, MI)</b>	<b>Organization or name you intend to use as provider:</b>
<b>Contact Person: (If Different from Requestor)</b> _____	<b>Telephone:</b> _____
<b>Mailing Address:</b> _____	<b>Fax:</b> _____
	<b>Email:</b> _____

## Part I: Statement of Qualifications

Please give a summary of your experience providing educational programs, along with any references.

**Summary of experience:** \_\_\_\_\_

## Part II: Statement of Organization

Please provide a detailed summary for each question. (All questions must be answered.)

1. How many workshops will you provide over the next 12 months? \_\_\_\_\_
2. How will your workshop(s) be advertised? \_\_\_\_\_
3. How many classes will be offered at each workshop? (Example: One to seven classes per workshop.) \_\_\_\_\_
4. When will a finalized agenda be available? \_\_\_\_\_
5. Describe the method you intend to use to evaluate each class. (If this evaluation process includes a form, please provide a copy.) \_\_\_\_\_
6. Describe how you will verify attendance throughout the term of each class and how you will report attendance to Ecology. \_\_\_\_\_
7. You are required to provide each student proof that they completed each class. Please provide a copy of the certificate you intend to use.
8. What is your cancellation policy? \_\_\_\_\_

## Part III: Statement of Resources

Please identify the name(s) of the training facility (ies) you intend to use for the workshop(s) and the location(s). Provide dates for each workshop.

<b>Name(s) of the facility(ies) where the training will take place:</b>	<b>Facility Address:</b>	<b>Workshop Date(s)</b>

## Part IV: Statement of Accountability

The statement of accountability shall justify the cost of the class or workshop and must contain a statement assuring delivery of each class.

Please provide a statement of accountability.  
\_\_\_\_\_

## Part V: Comments and Signatures

**Comments:** \_\_\_\_\_

The information provided in this application is true and accurate.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_



# Continuing Education Unit Syllabus

## Agency Use

- Group - 1 CEU Value \_\_\_\_\_
- Group - 2 CEU Value \_\_\_\_\_
- Group - 3 CEU Value \_\_\_\_\_
- Group - 4 CEU Value \_\_\_\_\_
- Group - 5 CEU Value \_\_\_\_\_
- Group - 6 CEU Value \_\_\_\_\_
- Group - 7 CEU Value \_\_\_\_\_

Press F11 to move to input fields.

**Instructor Name: (Last, First, MI)**  
\_\_\_\_\_

**Name of Approved Provider:**  
\_\_\_\_\_

**Contact Person: (If Different from Instructor)**  
\_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Mailing Address:**  
\_\_\_\_\_

**Email:** \_\_\_\_\_

## Part I: Statement of Qualifications

Please provide a statement about your qualifications. \_\_\_\_\_

## Part II: Course Description

Please provide a detailed summary for each question. (All questions must be answered.)

<b>Course Title:</b> _____	<b>Course Date(s):</b> _____ <b>Start Time:</b> _____ <b>Finish:</b> _____	<b>Course length in hours:</b> _____	<b>Cost for Workshop:</b> \$ _____
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Please provide listing of textbooks, supplemental readings, or equipment, such as calculators or safety equipment required. \_\_\_\_\_

Please provide driving directions: \_\_\_\_\_

Please provide a course outline which details the specific subjects to be taught and any testing required. Use additional pages if needed. \_\_\_\_\_

## Part III: Statement of Relevance

How does this course pertain to the business, technical, regulatory, or safety aspects of well construction? Please include the goals and objectives of this class. \_\_\_\_\_

Will this class be open to all who desire to attend? Yes  No  If no, please explain: \_\_\_\_\_

What is the minimum number of students required to put on this class? \_\_\_\_\_

## Part IV: Comments and Signatures

**Comments:** \_\_\_\_\_

The information provided in this application is true and accurate.

Instructor Uki pcwtg<aaaaaaaaaaaaaaaaaaaaaaaaaaaaa""Vitr<\_\_\_\_\_Date: \_\_\_\_\_

I have reviewed this report and, in my judgment, the process has been properly followed.

Reviewer's Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_