



NORTH CAROLINA WATERWORKS OPERATORS ASSOCIATION

Huntersville Regional Certification School

A/B Surface Combined April 15-16, 2024

C-Surface April 17-18, 2024

C-Well April 18-19, 2024 (date change)

A/B-SURFACE SCHEDULE

Monday, April 15 Classes from 8am-5pm (lunch provided)

Tuesday, April 16 Classes from 8am-5pm (lunch provided)

Online training hours must be completed by 5pm Friday, April 26th

Location: Charlotte Water - 7980 Babe Stillwell Farm Rd. Huntersville NC, 28078

C-SURFACE SCHEDULE

Wednesday, April 17 Classes from 8am-5pm (lunch provided)

Thursday, April 18 Classes from 8am-5pm (lunch provided)

Online training hours must be completed by 5pm Monday, April 29th

Location: Charlotte Water - 7980 Babe Stillwell Farm Rd. Huntersville NC, 28078

C-WELL SCHEDULE

Thursday, April 18 Classes from 8am-5pm (lunch provided)

Friday, April 19 Classes from 8am-5pm (lunch provided)

CLASS DATE CHANGE

Online training hours must be completed by 5pm Friday, May 3rd

Location: Charlotte Water - 7980 Babe Stillwell Farm Rd. Huntersville NC, 28078

WHY CHOOSE A REGIONAL SCHOOL?

- **Classes held at Treatment Facilities**
- **Smaller Class Size**
- **2 Days of Onsite Instruction**
- **Balance of instruction completed online through Newly Developed Operator Resource Center (ORC)**
- **Treatment Plant Tours Included**
- **Access to Additional Online Training Modules**

**Must have at least 15 students
per class to be held**

Max number of students - 35

CHECKLIST

The following checklist is provided for your use to insure that you have taken the necessary actions to attend the School and be qualified to take the Exam.

- Send Class Registration Form (*see page 4*) and payment for the SCHOOL to:
Heather Cagle, NCWOA
PO Box 5466, High Point, NC 27262
Phone: 252-764-2094 ext 1
Fax: 252-764-2095
Email: heather@ncwoa.com

- Send EXAM APPLICATION and check for \$50.00 to the NCWTFO Certification Board:**
Visit the NCWTFO website for the electronic, apprentice or regular exam applications:
<http://deq.nc.gov/about/divisions/water-resources/operator-certification/drinking-water-operator-certification/dw-operator-certification-exams>. Phone: 919-707-9040

If you wish to take the exam on May 30, 2024 - Hickory, Raleigh & Williamston (Applications must be postmarked by 4/30/24).

Exam applicants: All supporting documentation (certificates, proof of education, etc.) must be submitted by the 15th day of the exam month.

- Information on books is listed on the next page. All exam questions are taken from the books listed on the next page.

- Read and study recommended materials. **Be sure to bring a calculator to ALL classes.**

REGISTRATION INSTRUCTIONS AND REQUIREMENTS

SCHOOL REGISTRATION FORM

To be completed by ALL students. Please complete one form per person. Please print or type. This form must be accompanied by a payment for the correct registration fee. Please make checks or money orders payable to **NCWOA** or **North Carolina Waterworks Operators Association**. We do not accept Purchase Orders. Please be sure to enter all information requested on the form. Incomplete forms will delay your registration or may be returned. All attendees must be pre-registered and paid in advance.

RECEIPT/CONFIRMATION OF REGISTRATION

All participants who pre-register will receive a receipt/confirmation. This acknowledgement will include specific information on the site.

CERTIFICATES OF ATTENDANCE OR COMPLETION

At the conclusion of online portion all participants, who have completed all lesson modules, will receive a Certificate of Attendance. These certificates will document attendance for professional growth contact hour requirements and/or successful class completion (31 drinking water hours). **No certificates will be given out early even if online lesson modules are completed.**

REFUNDS

Refunds will be issued (minus a \$25 administrative fee), if the refund is requested, in writing, by April 5, 2024. Substitutions may be made. Please inform us as soon as possible of substitutions so appropriate changes can be made.

MEMBER/NON-MEMBER STATUS

Only individuals who are current members of NCWOA are eligible for the member rate. Please refer to your membership card for your member #. We will verify registrations for eligibility and will return those who pay the incorrect amount. If you would like to become a member, please complete the membership application in this brochure and return with payment.

How to get books for school

Surface Water Treatment - Study Materials

Sacramento Manuals:

Website: <http://www.owp.csus.edu/> or
call: (916) 278-6142

Water Treatment Plant Operator Vol. 1 – 7th Edition

Water Treatment Plant Operator Vol. 2 – 7th Edition

Small Water System Operation & Maintenance –
6th Edition

Rules Governing Public Water Systems (Green Book) (02/22)

available for download from NCDEQ website

Surface Water “Needs To Know” – A Certification Study Guide for Surface Water Systems (2021)

available for download from NCWOA website

Rules Governing Water Treatment Facility Operators (Blue Book) (09/18)

available for download from NCWOA website

Well Water Treatment - Study Materials

Sacramento Manuals:

Website: <http://www.owp.csus.edu/> or
call: (916) 278-6142

Small Water System Operation & Maintenance –
6th Edition

Water Treatment Plant Operator Vol. 1 – 7th Edition

Water Treatment Plant Operator Vol. 2 – 7th Edition

Rules Governing Public Water Systems (Green Book) (02/22)

Call 919-707-9100 or available for download from
NCDEQ website

Ground Water “Needs To Know” – A Certification Study Guide for Groundwater Systems (2021)

available for download from NCWOA website

Rules Governing Water Treatment Facility Operators (Blue Book) (09/18)

available for download from NCWOA website

Well Construction Standards (Red Book) (10/09)

available for download from NCWOA website

This school serves as a **REVIEW** of topics covered in the study manuals listed above from which all exam questions are derived.



NORTH CAROLINA WATERWORKS OPERATORS ASSOCIATION

Huntersville Regional School Registration Form

RECEIVED ON OR BEFORE April 5, 2024

Please Print or Type

NAME (First, Middle, Last): _____ SOCIAL SECURITY #: XX-XXX-_____

EMPLOYER / ORGANIZATION: _____

ADDRESS FOR CONFIRMATION: _____

CITY: _____ STATE _____ ZIP _____ COUNTY: _____

WORK PHONE: _____ EXT: _____ FAX: _____

ATTENDEE'S EMAIL: _____

(ORC online login instructions will be sent to this email address.)

By registering for this training event, you acknowledge that you have read and understand NCWOA's Code of Ethics statement which can be found at www.ncwoa.com

ATTENDEE'S INDIVIDUAL NCWOA MEMBER # (must be included to be eligible for member rate): _____

ATTENDEE'S T-SHIRT SIZE _____

NC WATER TREATMENT CERTIFICATE TYPE PRESENTLY HELD:

- AW BW CW DW AS BS CS
- AD BD CD DD CC/BF NONE YET

NC WATER TREATMENT CERTIFICATE # (OPERATOR ID #): _____

WASTEWATER CERTIFICATION # _____

PLEASE CHECK WHICH CLASS YOU ARE REGISTERING FOR AND CIRCLE RATE:

<u>CLASS TITLE</u>	<u>NCWOA MEMBER RATE</u>	<u>NON-MEMBER RATE</u>
<input type="checkbox"/> A/B Surface Combined Mon-Tues April 15-16	\$450.00	\$525.00
<input type="checkbox"/> C Surface Wed-Thurs April 17-18	\$450.00	\$525.00
<input type="checkbox"/> C Well Thurs-Fri April 18-19 <i>(Date change)</i>	\$450.00	\$525.00

PLEASE SEND APPLICATION AND PAYMENT TO:

Heather Cagle, NCWOA
PO Box 5466, High Point, NC 27262
Phone: 252-764-2094 ext 1
Fax: 252-764-2095
Email: heather@ncwoa.com

By Credit Card: ___ Visa ___ MC ___ Am Ex ___ Discover

Name on Credit Card: _____

Credit Card Number: _____

Exp Date: Month ___ Year ___ Security Code from back of card: _____

Cardholder Signature: _____

If cardholder is other than attendee, what email address should the CC receipt be sent to? _____

To ensure that you receive the emailed receipt, please add heather@ncwoa.com to your email address book.

NCWOA USE: Amount _____ CK# _____ E S Processed _____

North Carolina Waterworks Operators Association

MEMBERSHIP APPLICATION



MISSION STATEMENT: To provide knowledge, skills & educational opportunities for drinking water professionals; develop working relationships with other water treatment organizations; project a positive image and communicate the importance of safe drinking water.

Membership Application

ANNUAL DUES ARE \$60.00 FOR 2024

First Name: _____ Middle Initial: _____ Last Name: _____
 Nickname: _____ Social Security # (last 4 digits): xxx-xx-_____ If Renewal, what is your NCWOA Member #: _____

YOUR Individual Operator Certification #: (Issued by NCWTFOCB) _____

Certificate(s) Held:

____ A-Surface ____ B-Surface ____ C-Surface ____ A-Well ____ B-Well ____ C-Well ____ D-Well
 ____ A-Dist ____ B-Dist ____ C-Dist ____ D-Dist ____ Cross-Connection
 _____ Wastewater #'s
 ____ None Yet ____ You are not an Operator & do not plan to become Certified.

PLEASE SELECT YOUR PREFERRED ADDRESS (This is where confirmations & membership info will be sent.)

____ Home Address: _____

City: _____ State _____ Zip _____ County: _____

____ Employer Name: _____

MAILING Address: _____

City: _____ State _____ Zip _____ County: _____

Work Phone : _____ Ext: _____ Fax: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

How would you like to receive your issues of Go With The Flow? Postal Delivery _____ OR Email _____

How would you like to receive your Section Meeting notices? Postal Delivery _____ OR Email _____

NOTE: Memberships are based upon a calendar year. Membership cards will be mailed with receipt. These cards will contain your name, membership number, and membership expiration date.

NOTE: Please make checks payable to "NCWOA" or "North Carolina Waterworks Operators Association." We do NOT accept Purchase Orders. Credit Card payments may be mailed, faxed, or scanned but NOT called in

CREDIT CARD PAYMENT

Credit Card Type: ____ Visa ____ MC ____ AmEx ____ Discover

Name on Credit Card: _____

Credit Card Number: _____

Exp Date: Month _____ Year _____ Security Code from back of Card _____

Cardholder's Signature: _____

If cardholder is other than attendee, what email address should the CC receipt be sent to? _____

To ensure that you receive the emailed receipt, please add heather@ncwoa.com to your email address book.

PLEASE SEND APPLICATION AND PAYMENT TO:

Heather Cagle, NCWOA
 PO Box 5466
 High Point, NC 27262
 Phone: 252-764-2094 ext. 1
 Fax: 252-764-2095
 Email: heather@ncwoa.com

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 : Credit Card Payment :
 : Cannot be Processed :
 : Over the Phone :
 :

NCWOA USE: Amount: _____ CK# _____ E S Processed: _____