STATE OF CALIFORNIA Department of Industrial Relations Division of Occupational Safety and Health

M&T District 1 (North) 1750 Howe Ave, Suite 450 Sacramento, CA 95825-3369 (916) 574-2540

M&T District 2 (Central) 6150 Van Nuys Blvd, Suite 310 Van Nuys, CA 91401-3345 (818) 901-5420 M&T District 3 (South) 464 W. Fourth St., Suite 354 San Bernardino, CA 92401-1442 (909) 383-6782

SAFETY REPRESENTATIVE / GAS TESTER APPLICATION

Name of Applicant						
1 J A. J. J *	First	Middle		La	st	
Home Address*	Street		City		State	Zip
Home Phone* (_)	Cell)		
Company's Name						
Business Address						
Business Phone (Street)		City		State	Zip
Applicant's Description:	Age	Weight		Height_		
	Color Hair	Eyes		Sex		
	Birthplace		Birth	Date		
Driver's License No		State	E-Mail _			
1. Have you taken this	Certificate Examination in Ca	lifornia? Yes		No		
2. Have you ever had	this Certificate?	Yes		No		
If yes, Type of Ce	ertificate:					
	this Certificate revoked in Cali					
TYPE OF CERTIFICATIO	N REQUESTED: Safe	ety Representativ	/e		Gas Tester_	
(A) Unc	derground Mining and Tunnelin	D	(D) Pipejac	cking/Boring		
(B) Tun			(E) Limited			
	derground Mining		_ (_)	•		
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The application fee is \$15.00 for the Certification and \$15.00 for renewals. Make checks or money orders payable to the "State of California."

Applicant must appear in person to be certified. A Certification will be issued only to persons possessing sufficient knowledge and experience to perform the respective duties. The Certification will be issued after the Applicant has passed the examination and a qualification check has been made to determine the Applicant's qualifications.

Labor Code, Section 8003. Violation of regulations, rules, orders, or special orders adopted by the Board or Division as a condition of Certification shall be punishable by suspension or revocation of Certification unless such violation is responsible for death or injury to employees, in which case it shall be punishable as a misdemeanor.

*If you want your certificate sent to your business, home address is not required, and home phone is optional.

<u>*Do you want to have personal information releasd to potential employers?</u> Yes No

UNDERGROUND EXPERIENCE

(Use additional sheets if necessary)

At least one year of qualifying experience is required for Gas Tester applicants, and at least two years of qualifying experience is required for Safety Representative applicants. Please list your qualifying experience.

Employer	Your P	Position
Address	From (Mo./Yr.)to (Mo./Yr.)
Job duties		
Supervisor	Tele	phone No
Employer	Your P	Position
Address	From (Mo./Yr.)to (Mo./Yr.)
Job duties		
Supervisor	Tele	phone No
Employer	Your P	Position
Address	From (Mo./Yr.)to (Mo./Yr.)
Job duties		
Supervisor	Tele	phone No
Employer	Your P	Position
Address	From (Mo./Yr.)to (Mo./Yr.)
Job duties		
Supervisor	Teleph	one No.
Additional qualifying ed	ducation, training, seminars, etc.	
Other States' Licenses	or Certificates, if any	
I hereby certify under p	enalty of perjury that the information on this applic	ation is true and correct.
Date	Applicant's signature	
Date	Approved for exam by	

$\label{eq:cal_ost} Cal/OSHA-W-1$ statement of citizenship, alienage, and immigration status for state public benefits

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Pr	int Name of Applicant Date	
De	int Name of Person Acting for Applicant, if any Relationship to Applicant	
F1.	Int Name of Person Acting for Applicant, if any Kelatonship to Applicant	
<u>St</u>	tate Public Benefits to Citizen and Aliens	
Ci	itizens and nationals of the United States, who meet all eligibility requirements for the benefits described in subsection 344.85 (b)(1)-(b)(6), must fill out Sections A and D.	
Al	liens, who meet all eligibility requirements for the benefits, as described in subsection 344.85 (b)(1)-(b)(6), must c SECTIONS A, B, C, and D of this form.	omplete
SI	ECTION A: Citizenship/Immigration Status Declaration	
1.	Is the applicant a citizen or national of the United States? Yes No	
	If the answer to the above question is yes, where was he/she born?	
	X (City/State)	
2.	To establish citizenship or nationality, please submit one of the documents on List A (attached hereto) which is unaltered to establish proof.	legible and
IF	FYOU ARE A CITIZEN OR NATIONAL OF THE UNITED STATES, GO DIRECTLY TO SECTION D.	
	FYOU ARE AN ALIEN, PLEASE COMPLETE SECTION B, OR IF APPLICABLE, SECTION C.	
SI	ECTION B: Alien Status Declaration	
IN	MPORTANT : Please indicate the applicant's alien status below, and submit documents evidencing such status. T documents listed for each category are the most commonly used documents that the United States Immigration a Service (INS) provides to aliens in those categories. You can provide other acceptable evidence of your alien so listed below.	and Naturalization
1.	An alien lawfully admitted for permanent resident under the Immigration and Naturalization Act (INA).	
	 Evidence includes: INS Form 1-551 (Alien Registration Receipt Card, commonly known as a "green card"); or Unexpired Temporary 1-551 stamp in foreign passport or on INS Form 1-94 	
2.	 An alien who is granted asylum under section 208 of the INA. Evidence includes: INS Form 1-94 annotated with stamp showing grant of asylum under section 208 of the INA; INS Form 1-688B (Employment Authorization Card) annotated "274a. 12(a)(5)"; INS Form 1-766 (Employment Authorization Document) annotated "A5"; Grant letter from the Asylum Offi Order of an immigration judge granting asylum. 	ice of INS; or
3.	 A refugee admitted to the United States under section 207 of the INA. Evidence includes: INS Form 1-94 annotated with the stamp showing admission under section 207 of the INA; INS Form 1-688B (Employment Authorization Card) annotated "274a 12(a)(3)"; INS Form 1-766 (Employment Authorization Document) annotated "A3"; or INS Form 1-571 (Refugee Travel Document). 	
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4.	 An alien paroled into the United States for at least one year under section 212(d)(5) of the INA. Evidence includes: INS Form 1-94 with stamp showing admission for at least one year under section 212(d)(5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.) 	
	 An alien whose deportation is being withheld under section 243(h) of the INA (as in effect immediately prior to September 30, 1998) or Section 241 (b)(3) of such Act (as amended by section 305(a) of division C of Public Law 104-208). Evidence includes: INS Form 1-688B (Employment Authorization Card) annotated "274a.12(a)(10)"; INS Form 1-766 (Employment Authorization Document) annotated "A10", or Order from an immigration judge showing deportation withheld under section 243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under section 241(b)(3) of the INA. 	
	 An alien who is granted conditional entry under section 203(A)(7) of the INA as in effect prior to April 1, 1980. Evidence includes: INS Form 1-94 with stamp showing admission under section 203(a)(7) of the INA; INS Form 1-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or INS Form 1-766 (Employment Authorization Document) annotated "A3." 	
	 An alien who is Cuban or Haitian entrant (as defined in section 501(e) of the Refugee Education Assistance Act of 1980). Evidence includes: INS Form 1-551 (Alien Registration Receipt Card, commonly known as "green card") with the code CU6, CU7, or Unexpired temporary 1-551 stamp in foreign passport or on INS Form) 1-94 with the code CU6 or CU7; or INS Form 1-94 with stamp showing parole as "Cuban/Haitian Entrant" under section 212(d)(5) of the INA. 	☐ CH6;
7.	An alien paroled into the United States for less than one year under section 212(d)(5) of the INA. (Evidence includes INS Form 1-94 showing statues.)	
8.	An alien not in categories 1 through 8 who has been admitted to the United States for a limited period of time (a non-immigrant). Non-immigrants are persons who have temporary status for a specific purpose. (Evidence includes INS Form 1-94 showing this status.)	
SE	CTION C: Declaration for Battered Aliens	
-	portant: Complete this section if the applicant, the applicant's child or the applicant child's parent has been battered or extreme cruelty in the United States.	subjected
	Has the INS or the EOIR granted a petition or application filed by or on behalf of the applicant, the applicant's child, or the applicant's child's parent under the INA or found that a pending petition sets forth a prima facie case? Evidence includes one of the documents on List B (attached hereto).	
2.	Has the applicant, the applicant's child, or the applicant child's parent been battered or subjected to extreme cruelty in the United States by a spouse or parent, or by a spouse's or parent's family member living in the same house (where the spouse or parent consented to, or acquiesced in the battery or cruelty)?	
SE	CTION D:	

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ANSWERS I HAVE GIVEN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Х	Х
Applicant	Date
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Signature of Person Acting for Applicant	Date