

APPLICATION FOR NATIONAL SUSTAINABLE RESOURCE MANAGEMENT PROFESSIONAL CERTIFICATION

OFFERED BY THE NEW MEXICO RECYCLING COALITION
IN PARTNERSHIP WITH
THE NATIONAL RECYCLING COALITION

ACCREDITATION BY PENN STATE UNIVERSITY (Lehigh Valley)

*Please print legibly or type OR Submit application directly online at
www.recyclenewmexico.com/cert_classes.htm*

Note: If you wish to certify with the NM Environment Department, a separate application is required for their Operator Certification Program or to gain re-certification CEU credits.

Name: _____

Home Address: _____

City, State, Zip: _____

Home Phone Number: _____

Cell Phone Number: _____

Email Address: _____

GRANDFATHERING OPTION IF YOU HAVE COMPLETED THE NMRC/NMED RECYCLING FACILITY OPERATORS CERTIFICATION COURSE IN THE PAST 3 YEARS

Please check "Yes" if you have recently, as described above, completed the Recycling Facility Operators Certification Course, passed the test with 70% or higher and will use the course to count towards 24 CEU hours of this 30 hour certification. _____ Yes _____ No

******Please attach your NMED Recycling Certification Course certification that was mailed to your from NMED if you received that or NMRC will verify attendance and test score with NMED******

PROFESSIONAL EXPERIENCE

You must have one year of experience in the sustainable resource, recycling or composting industry. Please list your most recent positions relevant to establishing one year experience in the field. You may attach your resume as further support of your experience.

If a student completes the training prior to having one-year experience in the recycling field, they will receive their Certification once they have completed one year of experience in the field. For resume purposes those students may note something along the lines of "Certificate pending 1 year of work experience".

Employer Name: _____

Address: _____

City, State, Zip: _____

Dates of Employment: _____

Position Title: _____

Description of your qualifying experience in this position:

Employer Name: _____

Address: _____

City, State, Zip: _____

Dates of Employment: _____

Position Title: _____

Description of your qualifying experience in this position:

Employer Name: _____

Address: _____

City, State, Zip: _____

Dates of Employment: _____

Position Title: _____

Description of your qualifying experience in this position:

I certify that I submit this application in good faith and that all information provided is as accurate as possible.

Signature

Date

Please return completed and signed applications to:

NM Recycling Coalition, PO Box 24364, Santa Fe, NM 87502, Fax to 505-471-0328

Email to sarah@recyclenewmexico.com

Questions? Sarah Pierpont, 505-603-0558