#### VIRGINIA RURAL WATER ASSOCIATION PRESENTS

### 2-Day Wastewater Certification Review Prep (Class 1&2)

(14.0 CPE's for Wastewater)

## Wednesday & Thursday

March 19 & 20, 2025

Location:

Oxbow Center 13320 East Riverside Dr. St. Paul, VA

Registration Required



Quality On Tap!

2138 Sycamore Avenue Buena Vista, VA 24416 Phone: 540-261-7178 Fax: 540-261-2465 On the web: www.vrwa.org **Description:** The course is a 2-day review for Wastewater Treatment Operator Certification, specifically for Class 1 and Class 2 exams. It focuses on core competencies outlined in the Wastewater Treatment Operator Certification Need-To-Know Criteria. Participants will receive guidance on test preparation, study techniques, and time management strategies. Attendees should bring specific materials: the textbook *Operation of Wastewater Treatment Plants, Vol 2, 8th Edition\*\**, a notebook, writing tools, a highlighter, and a calculator. The instructor will provide additional resources, including the ABC Testing Formula/Conversion Table and class handouts. The class is limited to 20 participants to ensure a focused learning environment.

\*\*The textbook can be purchased through the Virginia Rural Water Association (VRWA)

### PRE-REGISTRATION IS REQUIRED Class size limited to 20

Instructor: Betty Green (Tardigrade Sustainable Solutions)

Class Times: 8AM-4PM

Lunch: One hour on your own

Cost: \$350 (VRWA members) \$450 (non-members)

**To Register**: The preferred method for registration is online at the VRWA website (www.vrwa.org). If an attendee does not have internet access, he or she may complete the registration form on the back of this page and fax it to the VRWA office at **540-261-2465**. For answers to questions regarding the registration process, please call the VRWA office at **540-261-7178**.

Registration Deadline: March 12, 2025

# 2-Day Wastewater Certification Review Prep (Class 1&2)

Class Registration Form				
2-Day Wastewater Certification Review Prep—14 CPE's—St. Paul, VA—March 19&20, 2025				
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Name (as it appears on your license)				
System/Organization				_
Mailing Address				
Phone:	Fax:			_
E-mail Address (required):				_
Total Amount Due: \$ □ Ch	neck Enclosed	□ Visa	□ Master Card	
Name (as it appears on your card):				
Credit Card Number:			Exp. Date:/	
3-digit CSV security code: C	ity/State:		Zip:	
Email Address for Receipt:				
Please make all checks out to VRWA and mail to: VRWA, 2138 Sycamore Avenue, Buena Vista, VA 24416				

**Cancellation Policy:** Full refund less \$25.00 administration fee will be given if VRWA is notified at least 10 days prior to date of class. No refunds will be given for cancellations with less than 10 days' notice, substitutions, however, are permitted. In the event that the class is cancelled by VRWA due to low enrollment, a full refund will be issued.

If paying by check please make all checks out to
Virginia Rural Water Association
2138 Sycamore Avenue
Buena Vista, VA 24416
(540) 261-7178
(540) 261-2465 fax

www.vrwa.org