



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Verification of Experience Form

Applicant: Complete the top portion of this form and forward it to the employer where you have completed the required field or work experience. Please check the credential for which you are applying.

- Lead Inspector Risk Assessor** - 25 inspections over a 3 month period as a certified/licensed lead inspector or at least one (1) year of experience (Bachelors) or two (2) years of experience (HS) in a related environmental field such as lead, asbestos, radon, or other environmental remediation work
- Lead Planner Project Designer** – successful completion of the design of at least three (3) lead abatement and/or management projects

NAME: _____ DATE OF BIRTH: ____/____/____

APPLICANT: DO NOT WRITE BELOW THIS LINE – FOR EMPLOYER USE ONLY

I certify that the above individual, employed by _____, *company name*

has completed at least _____ (please check) months of experience inspections projects
number

from dates ____/____/____ to ____/____/____.
mm *yyyy* *mm* *yyyy*

Applicant has the required environmental-related work experience in lead asbestos radon
 other _____ (please list).

Job Title/Position: _____

Describe the applicant’s work experience: _____

Form completed by:

NAME: _____	TITLE: _____
TELEPHONE: _____	EMAIL: _____
SIGNATURE: _____	DATE: _____

Mail or Email form to: **CT DPH**
 Environmental Licensing
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