DO NOT WRITE IN THIS SPACE- FOR OFFICE USE ONLY	
Date Submitted _____	Approved by _____ Date _____

WYOMING STATE BOARD OF EXAMINING WATER WELL DRILLING CONTRACTORS AND WATER WELL PUMP INSTALLATION CONTRACTORS

PO Box 614
Powell WY 82435
PHONE: (307) 851-7770 **&** FAX (888) 988 - 1322
jimmy.gordon@wyo.gov

CONTINUING PROFESSIONAL COMPETENCY

In accordance with Wyoming Water Well Drilling Contractors and Water Well Pump Installation Contractors, Rules and Regulations Chapter 7, Section 11: Forms.

"All renewal applications will require the completion of a continuing education form specified by the Board outlining CPC credit claimed. The license holder must supply sufficient detail on the form to permit audit verification, must certify and sign the continuing education form, and submit the form with the renewal application and fee."

PLEASE LIST BELOW ALL EDUCATION UNITS EARNED WITHIN THE LAST THREE (3) YEARS.
(Note: 18 hours of continuing education is required)

EDUCATION/TITLE	DATE OF INSTRUCTION	LOCATION	HRS. EARNED

_____ _____

Signature Date

I declare under oath that the above is true to the best of my knowledge.