VERIFICATION OF CONTINUING COMPETENCY FORM					
WEST VIRGINIA TRANSPORTATION ENGINEERING TECHNICIAN CERTIFICATION BOARD					
http://www.transportation.wv.gov/highways/wvtret/Pages/default.aspx					
Certification #	First Name			MI]
Certification Level	Last Name		[Year Ending:12	2/31/25
1. CONTACT INFORMATION					
Home Address		Employer			
City		Work Addre	ess		
State, Zip		Work City			
Home Phone		Work State			
E-mail		Work Pho Work Fax	ne		
2. TDH CONFIRMATION (List TDH's claimed from events completed between January 1, 2024 and December 31, 2025)					
NAME OF EVENT	LOCATION OF	EVENT	DATE	TDH'S CLAIMED	DON'T WRITE IN SPACE
			DATE		
	(H'S FROM 2022-2023		
(24 TDH's are required to become compliant) TOTAL TDH'S CLAIMED 2024-2025					
	(Limit of 12 TDH'	s) TDH'S TO CAF	RYOVER 2026-2027		
To assure prompt processing return this form without de	elay to:		nts can be made by follo n the link listed below:	wing the	
Email: DOHWVTRETBoard@wv.gov or		https://transpo	rtation.wv.gov/highway	s/wvtret/Docume	
WV Transportation Engineering Technician Certification Board 1900 Kanawha Blvd, East Building 5, Room A-450 Charleston, WV 25305			<u>ment-Letter.pdf</u>		
		If paying online confirmation s	e, please include your p heet with your form.	ayment	
Attention: Kimberly Ballard					
PLEASE DO NOT ATTAC	H ANY ADDITIONAL DOCU	JMENTS WHEN F	RETURNING THIS FORM	<u>!!</u>	
3. <u>SIGNATURE AND DATE (REQUIRED)</u> I certify that the information provided on this form is correct rejection of this form and the revocation of any/all WV TR Qualifications and Guidelines. I accept the conditions set f Requirements) of the Qualifications and Guidelines. I und verification.	ET certifications issued in m orth; and I have accurately d	y name. I further ocumented TDH's	certify that I have read an in accordance with Section	nd understand the Boon V (Continuing Edu	oard's cation

Signature:

Date: