

Water & Wastewater Facility
Operators Certification Program
Guideline to Completing the ONLINE
Application for Exam Registration



The information provided in the application will be used to register the individual for an operator certification exam under the [Water and Wastewater Facility Operators Regulation](#).

Ensure you are eligible for the class and category of exam you register for.

- Exams must be written sequentially, starting at the lowest class. Small system exams are not a prerequisite for a Class 1 exam, as small systems are a category on their own.
- You can only write an exam one class higher than you currently hold certification for and must meet requirements for certification in Schedule B of the regulation.
- You can write an exam if you are an operator-in-training or enrolled in an education or training program in water or wastewater fields.

Operators must wait 4 months after failing an exam before re-writing the same exam.

If you have previously attempted an exam in the same class and category **3 times without achieving a passing grade**, you must provide confirmation to wwopcert@gov.mb.ca that you have completed a course worth at least 3.0 CEUs in this category in order to register for the exam.

Please note exam results expire after 3 years; therefore, you must be eligible to apply for certification within 3 years of writing the exam.

OPERATOR REGISTRATION

This registration may be filled out by the operator or by an authorized person on the operator's behalf, which requires the attachment of a consent form at the end of the form. See page 3 for a consent template.

SECTION A: OPERATOR INFORMATION

This section is used to collect the operator's file and contact details. Only your name and email address are shared with Water Professionals International (WPI - the exam provider) so that you receive your exam results directly.

Confirmation of exam registration, exam marks and other correspondence will be sent to the email address provided. If you consent to have your Employer also receive your mark by email, please provide the Employer's email address. This will also be shared with WPI.

If you are employed at a facility, the Facility Name and Classification is needed to ensure that you are eligible to write an exam for this class of certification.

If there is a change of personal information (e.g., address, phone number, etc.) after the application was made (or at any other time), immediately inform the Certification Program.

SECTION B: EXAMINATION TYPE

Ensure you have confirmed the class and type of exam you are eligible to write.

Select the exam type, system type and class, exam location, and date of exam for which you would like to register by checking the appropriate boxes.

Refer to the exam schedule posted on our website at:

https://www.manitoba.ca/sd/pubs/waste_management/wastewater/current_exam_schedule.pdf

Please note: registration deadline is two weeks prior to exam date.

Space at each session is limited. There may be cases where you will not be able to write the exam on the preferred date. Morning sessions are always offered on the exam dates; applicants will be slotted into afternoon sessions when needed. You will be contacted by email with a confirmation for your exam date and time.

SECTION C: OPERATOR VERIFICATION

Provide confirmation that the personal information is allowed to be collected and shared with WPI, as necessary.

OR

SECTION C: DOCUMENTATION

If an application has been submitted on behalf of the operator, the authorized person must upload a signed consent form from the operator in a .jpg or .jpeg file.

This provides confirmation to the Program that the operator consents to the authorized person providing their personal and employment information to the Program. A template is provided on page 3.

The registration fee for an operator's certification exam is \$150 for each exam of any category or class. Using the online form, you can register for more than one exam or more than one operator and pay for multiple exam registrations at the same time. The fee portal opens once the final submission is made.

All exams are subject to a proctor fee payable to the facility hosting the exam. You will be provided with proctor fee and contact information for the exam facility hosting the exam in your registration confirmation email.

Failure to attend the exam will result in forfeiture of payment.

Exam fees are non-refundable and non-transferable to another individual.

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Personal information is being collected under the authority of Sections 13 and 15 of the Water and Wastewater Facility Operators Regulation of The Environment Act. The collected information will be used and disseminated by Manitoba Environment and Climate Change as part of the certification and examination process and will not be used or disclosed for any other purposes, except as authorized by law. This personal information will be shared with Manitoba Certification Program Specialist for the purposes of examination, certification, enforcement, renewals and data analysis. Limited information (name and email) will be shared also with Water Professionals International for examination purposes. The personal information is protected by the Protection of Privacy provisions of The Freedom of Information and Protection of Privacy Act. If you have any questions about the collection and use of the information, please contact:

Certification Program Specialist at wwopcert@gov.mb.ca
Box 35 - 14 Fultz Boulevard, Winnipeg MB R3Y 0L6
Tel: 204-945-0675

This publication is available in alternate formats, upon request.

Template - Consent Form

Employee Name: _____

Supervisor Name: _____

Employer (Company, Municipality, etc.): _____

I, _____ (employee name) _____, hereby consent to:

- Allow my supervisor/employer, _____ (supervisor/employer name) _____, to submit my personal information on my behalf to Manitoba Environment and Climate Change Certification Program and WPI (exam provider) for the purpose of application for certification exam.
- Allow Manitoba Environment and Climate Change Certification Program and WPI (exam provider) to provide my supervisor/employer, _____ (supervisor/employer name) _____, with a copy of my exam registration confirmation and exam results.

Employee Signature: _____

Date: _____