



**BITUMINOUS MACHINE RUNNER'S APPLICATION AND QUALIFICATION FORM**

Name of Applicant	Social Security Number
Address	Phone Number
Place of Birth	Date of Birth
Name of Company Employed By	Name of Mine Employed At

Miner's Certificate Number \_\_\_\_\_

**MINING EXPERIENCE**

Name of Mine	Type of Experience	Length of Service

**QUALIFICATIONS**

Machine Runner – Must possess Miner's Certificate and have 6 months experience as helper to a Machine Runner.

**CERTIFICATION**

This is to certify that the above named applicant, to the best of my knowledge, possesses the experience set forth in this application and is hereby recommended for the certification desired.

Total Length of Time in Mine	Total Length of Time as Machine Helper
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Signature of Applicant \_\_\_\_\_  
 Signature of Employer \_\_\_\_\_  
 Signature of Mine Superintendent \_\_\_\_\_  
 Signature of Mine Foreman \_\_\_\_\_

<b>For Official Use:</b>	
Inspector _____	District _____
Place of Examination _____	Date of Examination _____
Date of Certification _____	Number of Certificate Issued _____