

FOR SES USE ON	LY		
Date Application Received:		Application #:	
Received by:		Date Sent to Committee:	

Official Qualified Source Testing Observer (QSTO) Application Form

Please mail this application package to the address below, or scan and email to QSTIProgram@gmail.com to receive your qualification approval certificate:

The Source Evaluation Society P. O. Box 12124 Research Triangle Park, North Carolina 27709-2124

The information in this application will be treated as confidential by the SES Examination Board. Please type or print information except where a signature is required. Complete each section as completely as possible to ensure that the Board has adequate information to consider your application. Include additional pages where necessary. Two project descriptions for each project group for which you are requesting a QSTO qualification certificate is required. Be sure to have the application notarized before submitting the document. Along with the application, three references will be required. The Committee prefers at least two references to be from people outside the company if possible.

Once you have submitted your initial application, you need submit only your projects description portion for subsequent exams you take and pass. If you have any questions, please contact Theresa Lowe at QSTIProgram@gmail.com.



General Information					
Last name:	First name:	Middle initial: _			
Photo ID Identification Number					
Type of ID:					
If Driver's License, what State?					
Title:					
Organization Name:					
Business Address:					
Street Address:		or			
P. O. Box:					
City: State: Zip:					
Phone:	E-Mail Address:				
Fax Number:					
Home Address (or other option	nal address):				
Street Address:		or			
P. O. Box:					
City: State: Zip:					
Phone:	E-Mail Address:				
This is my application for Test Method Group(s): G1 G2 G3 G4 which I have taken and passed.					
If you <u>do not</u> wish to receive a QSTO (or QSTI) Wallet card along with your qualification certificate(s), please check the following box:					



Educational Background (optional, but may be considered in addition to source test and test observation experience): High School: City: ______Year of Graduation: _____ College or University: _____ City: _______Year of Graduation: _____ Type of Degree: Associate Degree Bachelors Masters Ph.D. Field in Which Degree Was Issued: ______ If you attended college or university but did not complete a degree, list areas of curricula studied: If you have more than one institution or completed one or more additional degrees, please list institution, degree, field of degree, year of graduation, city, state, country on a separate sheet. List any relevant Professional Development Courses taken (course name, provider, location, date, contact info):



Required: List any relevant field or laboratory safety training completed (cours					
name, provider, location, date, contact info):					
List any professional designations (Professional Engineer, Qualified					
Environmental Professional, etc.) currently held:					



Experience in Source Emissions Test Observation (<i>required</i>):	
1. Employer:Number of Years:	
Type of experience (test planning, field testing, test observing, test report	
reviewing, auditing):	
2. Employer:Number of Years:	
Type of experience (test planning, field testing, test observing, test report	
reviewing, auditing):	
3. Employer:Number of Years:	
Type of experience (test planning, field testing, test observing, test report	
reviewing, auditing):	
4. Employer:Number of Years:	
Type of experience (test planning, field testing, test observing, test report	
reviewing, auditing):	
Total years of experience in source air emissions testing or test observation: _ (at least one year's applicable experience is required for SES Source Testing Observation).	
Experience should include (check all that applies):	
[] Conduct pre-test meeting with source owner or operator, testing organization); approximate number conducted in last two years:	
[] Review and approve pre-test plans, approximate number conducted in last two years:	
[] Observe and audit field sample collection operations, approximate number conduc	cted
in last two years:	
[] Review and approve test reports (audit calculations, data validation, and results	
interpretation); approximate number conducted in last two years:	
[] Observe and audit sample recovery, handling, and custody operations, approxima	ate
number conducted in last two years:	
[] Conduct test observer training for staff; approximate number conducted in last two)
years:	
[] Conduct field testing; approximate number conducted in last two years:	



Demonstrated Skills

On one or more separate attachments (see Project Description Outline below), provide a clear and concise description of your involvement (e.g., responsibilities, pre-test through post-test activities, supervision level) in one or more projects representative of your of experience relative to the areas checked above. Please, provide descriptions of at least two separate projects.

The SES Examination Board expects all SES QSTO applicants to have demonstrated:

- Oral and written communication skills;
- Knowledge of basic technical and engineering principles;
- Knowledge of appropriate application and limitations of source emissions test methods;
- Understanding of various source types, pollutants, characteristic sampling conditions, and testing and process coordination challenges;
- Familiarity with sample analyses techniques and special considerations for different testing conditions (e.g., safety, representative sampling);
- Awareness of the conditions dictating test method modifications; and
- Problem solving and critical thinking skills.

In completing the paperwork for the application, please make every effort to show your command of as many of these skills as possible (see the SES website, www.sesnews.org, for guidance in preparing these project descriptions).



I hereby certify that the information contained in this application and on supporting documents attached to this application is correct to the best of my knowledge. I agree to indemnify and hold harmless the Source Evaluation Society, the SES QSTI/QSTO Review Board, the SES Board of Directors, and all others affiliated with the SES and its programs.

Applicant's Signature:	
Date:	
Notary Public:	
STATE OF	
COUNTY OF	
l,	, a Notary Public of the
County of	_, hereby certify that
personally can	ne before me this day and under oath
that the above form was executed by hir	m.
Witness my hand and official seal, this $_$	day of, 20
	Signature of Notary
My commission ex	pires . 20 .



Project Description Outline

Project scope and purpose (e.g., compliance demonstration, permit applicability				
determination)				
Date of project:				
Type of facility:				
Project Supervisor:				
Provide a clear and concise description of your responsibilities and involvement				
in the project in the areas of (do not submit copies of your reports or summaries				
of observations:				

- Knowledge of source operations, pollutant(s) and test method(s)
- o Pre-test planning
- o Pre-test and on-site QA/QC auditing
- o Test and process operations coordination
- o Sampling, sample recovery, and analyses observation
- Test report review and approval
- o Test outcome and other post-test activities