

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF MINE SAFETY

## **ATTENTION:**

## **Certification Examination Candidates**

#### **ANTHRACITE APPLICANTS:**

The eligibility criteria are established in Section 205 of the Anthracite Coal Mining Laws of Pennsylvania for Underground Mines "Act 346" § 346-205.

To apply for ANTHRACITE MINE FOREMAN certification, you must be at least 25 years of age and have satisfactory evidence of at least five years' practical experience as a miner, and of good conduct, capability and sobriety.

#### INDUSTRIAL MINERALS OR SHAFT/SLOPE APPLICANTS:

The eligibility criteria are established in Section 207 of Title 25 – Environmental Protection, PA Code Chapter 207, Noncoal Underground Mines, § 207-214.

To apply for INDUSTRIAL MINERALS MINE FOREMAN certification the individual shall:

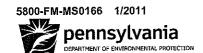
- 1. Be at least 21 years of age.
- 2. Have at least 2 years of practical experience as a noncoal underground miner or have 1 year of practical experience as a noncoal underground miner and either possess a Bachelor of Science Degree in mining engineering, possess a certificate of qualification under Section 205 of the Pennsylvania Anthracite Coal Mine Act (52 P.S. § 70-205) or Section 206 of the Pennsylvania Bituminous Coal Mine Act (52 P.S § 701-206) or possess an acceptable certificate of qualification issued by another state. and
- 3. Possess a Pennsylvania Underground Industrial Minerals Blaster's License.

### To apply for Shaft/SLOPE FOREMAN certification the individual shall:

- Be at least 21 years of age.
- 2. Have at least 2 years of practical experience in the sinking of slopes and shafts or

Have 1 year of practical experience in the sinking of slopes and shafts and either possess:

- a. A Bachelor of Science Degree in mining engineering.
- b. A certificate of qualification to be a coal mine foreman or assistant coal mine foreman issued pursuant to the Acts.
- c. A certificate of qualification to be an industrial mineral underground mine foreman.
- d. An acceptable certificate of qualification issued by another state. and
- 3. Possess a Pennsylvania Underground Industrial Minerals Blaster's License or Mine Opening Blaster's License.



## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF MINE SAFETY

## **Application for Mine Officials Certification**

READ BEFORE ATTEMPTING TO COMPLETE THIS APPLICATION: After you have (a) answered questions 1-5, (b) had three persons complete the certificate of character (question 6), and (c) obtained notarized statements from each of the mines at which you have worked (question 7), then <u>sign your name at the bottom of each page of the application and complete the affidavit on the last page in the presence of a notary public.</u>

1.	Check the appropriate box:		MIIN # (MSHA Individual Identification #)				
	(CHECK	ALL THAT APPL	Y FOR THIS EXAMINA	ATION)			
	Anthracite Mine Foreman	☐ Industrial M	inerals Mine Foreman	☐ Shaft/Slop	e Foreman		
2.	Name		Social Security	No. (Last four) XX	X-XX		
	Address		Date of Birth		Age:		
			Place of Birth				
	City	tate Zip Code		City	State		
	Phone (include area code)		Are you a citize	en of the U.S.?			
	Length and nature of service in or a	bout mines					
				Total experience			
	Current employer						
	Employer's address						
	Mine presently employed at	<u> </u>					
3.	Have you ever had a mine official c	ertification revoked	in the past? Yes	No 🗌	· ·		
4.	Qualifying Education (if necessary,	complete on addit	ional sheet)				
	Degree (attach copy)	Date Obtained	School	Total Credit Hours	Major		
	a			-			
	b						
5.	Prior Certificates Obtained from assistant mine foreman, etc.)	the Commonweal	th of Pennsylvania (i.	e. miners certificate	, blasters license,		
	Type of Certificate	•	Date Received	Certif	icate No.		
	a						
	b						
	c						
	d			-			
	e				·		
Sig	nature of Applicant						

## **CERTIFICATES OF CHARACTER**

a.	I,		, have known the applicant				
	-, -	(name)		(name of applicant)			
	for		years, and, by my signature, I certify that the app	olicant is a person of good mora			
		(number)					
character and known temperate habits.							
	(signature of person certifying character)						
	Му осс	cupation is		and my addre			
	is _						
		•					
b.	1,		, have known the applicant				
٠.	-, -	(name)	· · · · · · · · · · · · · · · · · · ·	(name of applicant)			
	for		years, and, by my signature, I certify that the ap	plicant is a person of good more			
	101	(number)	yourd, arm, by my dignature, reason, and				
	cnarac	ter and known tempe	erate nabits.				
			(-ithree of nevern continue character)				
			(signature of person certifying character)				
				and my addre			
	Му ос	cupation is	(signature of person certifying character)	and my addre			
	My oc			and my addre			
	•			and my addre			
C.	•						
c.	•			and my addre			
c.	is		, have known the applicant	(name of applicant)			
C.	•			(name of applicant)			
C.	is l, for	(name) (number)	, have known the applicant years, and, by my signature, I certify that the ap	(name of applicant)			
C.	is l, for	(name)	, have known the applicant years, and, by my signature, I certify that the ap	(name of applicant)			
C.	is l, for	(name) (number)	, have known the applicant years, and, by my signature, I certify that the ap	(name of applicant)			
C.	is  I,  for  charac	(name) (number) oter and known temp	, have known the applicant  years, and, by my signature, I certify that the aperate habits.  (signature of person certifying character)	(name of applicant) plicant is a person of good mor			
C.	is  I,  for  charac	(name) (number) oter and known temp	, have known the applicant  years, and, by my signature, I certify that the aperate habits.	(name of applicant) plicant is a person of good mor			
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C.	is  I,  for  charace	(name) (number) oter and known tempore	, have known the applicant  years, and, by my signature, I certify that the aperate habits.  (signature of person certifying character)	(name of applicant) plicant is a person of good mor			

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7. Identify the work experience that establishes your eligibility to take the test for which you are applying. Answer the following questions about each position in which you worked to acquire the required experience. See the instructions for calculating eligibility which are included with this application package.

Job Title:	· · · · · · · · · · · · · · · · · · ·				
Mine Operator: Name of Mine:					
Date (Month/Day/Year) on which you began work in this position:					
Date (Month/Day/Year) on which yo	ou ceased work in this position:				
Description of your job duties in this	position:				
Did you work within 1,000 feet of the					
How many days did you work within	1,000 feet of the face in this position?				
Were you absent from working und military service, or temporary assign					
How many days? For what reason(s):					
	r in this position?				
Job Title:					
Mine Operator:	Name of Mine:				
Date (Month/Day/Year) on which yo	ou began work in this position:				
Date (Month/Day/Year) on which yo	ou ceased work in this position:				
Description of your job duties in this	position:				
Did you work within 1,000 feet of th	e face in this position: Yes 🗌 No 🗌				
How many days did you work within	1,000 feet of the face in this position?				
Were you absent from working und military service, or temporary assign	lerground during this time period for reasons such as illness, injury, layoffs, education, nment to surface activities? Yes $\square$ No $\square$				
How many days?	For what reason(s):				
Who was your immediate supervisor	or in this position?				

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# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF MINE SAFETY

## **Employer's Verification of Work Experience**

Commonwe	ealth of Pennsylvania				
County of)		SS			
	, b	eing duly sworn, de	eposes and says:		
(a)	that he/she is or was an	official at	(Name of Mine)	_;	
(b)	that he/ she has reviewed the information provided by the applicant;				
(c) that he/ she <u>either</u> has personal knowledge about the applicant's claims about work experience mine <u>or</u> has compared the applicant's claims about work experience at this mine with the re- that employer; and				laims about work experience at this nee at this mine with the records of	
(d)	that the information aboaccurate.	ut the applicant's	work experience reflec	cted in this application is true and	
				(Signature of verifying official)	
				(Position at Mine)	
Signed and sworn to before me This day of		, 2			
		(Notary Public)			
		(Signature of Ap	oplicant)		

## Applicant's Verification

Commonwea	atti di Femisyivama)		·			
County of	)					
		, being duly sworn, deposes an	d says:			
•						
(a) that he/she has read, understood and followed the instructions for completing this application						
(b) that this application consists of (number) of pages;						
(c)						
(d)						
			(Signature of Applicant)			
	sworn to before me day of	, 2				
	·	(Notary Public)				

The Commonwealth of Pennsylvania, Department of Environmental Protection, provides this information to assist you in determining whether you are eligible for the Mine Officials Certification Examination.

"Working section" means "within one thousand (1,000) feet of the face."

#### How to count a year -

A year of work means that you were employed doing work underground in a mine for a full year and that you actually worked underground for at least 240 days within that calendar year.

### You should:

- Count each day you worked as one individual day, even if you worked more than one shift on that day.
- <u>Count</u> only days when you worked underground.
- Not count days when you worked on the surface.
- Not count days when you did not work because of illness, injury, vacation, strike, or education.

### **Examples:**

- 1. You were employed on October 1 and worked 35 days between October 1 and November 20. On November 21, you became ill and did not return to work until February 1. None of the days between November 20 and February 1 would count toward your one-year calculation. You were not available for work for 72 days which would extend your one year calculation from October 1 by 72 days.
- 2. You were employed on January 15 and you worked six days a week for forty (40) weeks, without interruption. By November 15 you have already worked 240 days underground; you must continue working until January 15 of the next year to meet the one-year requirement.