



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 202 of the Pennsylvania Bituminous Coal Mine Safety Act (52 P.S. § 690-202) 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:

1. 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.



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 **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.**

1. Check the appropriate box: MIIN # (MSHA Individual Identification #) _____

(CHECK ALL THAT APPLY FOR THIS EXAMINATION)

Anthracite Mine Foreman Industrial Minerals Mine Foreman Shaft/Slope Foreman

2. Name _____ Social Security No. (Last four) XXX-XX- _____
 Address _____ Date of Birth _____ Age: _____
 _____ Place of Birth _____
 City _____ State _____ Zip Code _____ City _____ State _____
 Phone (include area code) _____ Are you a citizen of the U.S.? _____
 Length and nature of service in or about mines _____
 Number of years experience in working section _____ Total experience _____
 Current employer _____
 Employer's address _____
 Mine presently employed at _____

3. Have you ever had a mine official certification revoked in the past? Yes No

4. Qualifying Education (if necessary, complete on additional sheet)

	Degree (attach copy)	Date Obtained	School	Total Credit Hours	Major
a.	_____	_____	_____	_____	_____
b.	_____	_____	_____	_____	_____

5. Prior Certificates Obtained from the Commonwealth of Pennsylvania (i.e. miners certificate, blasters license, assistant mine foreman, etc.)

	Type of Certificate	Date Received	Certificate No.
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____

Signature of Applicant _____

CERTIFICATES OF CHARACTER

6. Have three persons, who are not related to you, complete and sign the certificates of character on this page.

a. I, _____, have known the applicant _____

(name) (name of applicant)

for _____ years, and, by my signature, I certify that the applicant is a person of good moral

(number)

character and known temperate habits.

(signature of person certifying character)

My occupation is _____ and my address
is _____

b. I, _____, have known the applicant _____

(name) (name of applicant)

for _____ years, and, by my signature, I certify that the applicant is a person of good moral

(number)

character and known temperate habits.

(signature of person certifying character)

My occupation is _____ and my address
is _____

c. I, _____, have known the applicant _____

(name) (name of applicant)

for _____ years, and, by my signature, I certify that the applicant is a person of good moral

(number)

character and known temperate habits.

(signature of person certifying character)

My occupation is _____ and my address
is _____

Signature of Applicant _____

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 you ceased work in this position: _____

Description of your job duties in this position: _____

Did you work within 1,000 feet of the 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 underground during this time period for reasons such as illness, injury, layoffs, education, military service, or temporary assignment to surface activities? Yes No

How many days? _____ For what reason(s): _____

Who was your immediate supervisor in this position? _____

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 you ceased work in this position: _____

Description of your job duties in this position: _____

Did you work within 1,000 feet of the 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 underground during this time period for reasons such as illness, injury, layoffs, education, military service, or temporary assignment to surface activities? Yes No

How many days? _____ For what reason(s): _____

Who was your immediate supervisor in this position? _____

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF MINE SAFETY

Employer's Verification of Work Experience

Commonwealth of Pennsylvania

County of _____) SS

_____, being duly sworn, deposes 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 **either** has personal knowledge about the applicant's claims about work experience at this mine **or** has compared the applicant's claims about work experience at this mine with the records of that employer; and
- (d) that the information about the applicant's work experience reflected in this application is true and accurate.

_____ (Signature of verifying official)

_____ (Position at Mine)

Signed and sworn to before me

This _____ day of _____, 2_____

_____ (Notary Public)

_____ (Signature of Applicant)

Applicant's Verification

Commonwealth of Pennsylvania)

County of _____) SS

_____, being duly sworn, deposes and 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) that the statements and information provided in this application are true, complete, and correct; and
- (d) that it is his/ her intent that the statements and information being provided by this application will be relied upon by the public officials reviewing this application.

_____ (Signature of Applicant)

Signed and sworn to before me

This _____ 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.
- **Count** 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.