



FOR DEPARTMENT USE ONLY

Date Received: _____ Date Approved: _____

Approval Sent: _____ Sponsor Number: _____

Annual Sponsor Application for Providing Continuing Education Credits Private Sewage Disposal Program

Name of Organization, Agency, Individual _____

Contact Person _____

Phone Number _____

Address/City/State/ZIP code _____

E-mail address _____

Obligations to be a sponsor:

- Notify the Department in writing of each training session a minimum of 45 days prior to training. Notification should consist of the following:
 - Title of session(s)
 - Training for which license(s)/certification(s)
 - Location of session
 - Instructor(s) or presenter(s) name and brief work/experience description
 - Brief description of each topic and amount of time allocated for each topic/session
- Total training session contact hours, excluding breaks (a training session contact hour is 60 minutes).
- At each training session the attendees must sign in or a roll call must be taken.
- Attendees must receive a certificate of attendance and provide a draft for the Department to review that includes:
 - Name of attendee
 - Attendee's license or certification number
 - Name of sponsor
 - Type of training and session contact hours
 - Date of training
 - Location of training
 - Course approval number issued by the Department
- Submit to the Department a completed electronic roster of attendees for each session on the format provided by the Department. The document must be submitted no more than 14 days following the course.

By signing the following you acknowledge the obligations of being a sponsor and will comply with the above requirements. Failure to comply with the above requirements will result in loss of sponsor's ability to provide training for continue education credit.

Signature of Representative

Date

Proposed Training		Credits Type
Location	Date/Time	Private Sewage Disposal Installation or Pumping Contractor license or Portable Sanitation Technician certification
_____	_____	_____
_____	_____	_____
_____	_____	_____

IMPORTANT NOTICE: The Illinois Department of Public Health is requesting disclosure of information necessary to accomplish the statutory purpose as outlined under Public Act 85-0863. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center.