

ILLINOIS DEPARTMENT OF NATURAL RESOURCES

SURFACE MINE SUPERVISOR

APPLICATION OF CANDIDATE FOR EXAMINATION BEFORE THE OFFICE OF MINES AND MINERALS

20

TO THE HONORABLE MEMBERS OF THE STATE MINING BOARD, Springfield, Illinois

We, the undersigned, know (Name)

to be of good moral character and temperate habits and do respectfully recommend the above person to your honorable body as a worthy candidate for examination for certificate of competency as: Surface Mine Supervisor

Table with 3 columns: Signature, Address, Occupation. Multiple rows for listing names and details.

This Application must be signed by not less than 10 residents of the community in which you reside.

Surface Mine Supervisor

Affidavit of Candidate for Examination before the ILLINOIS STATE MINING BOARD

I, Social Security #, MIIN

do solemnly swear (or affirm) that I am a citizen of the United States of America or lawfully admitted for permanent residence. My address is:

Mailing Address City County State Zip

I am years old and was born (D.O.B.) in the State of

I have had practical mining experience for years. Phone Number ()

I am currently employed at:

If your answer to the following question is "yes", please attach a signed detailed explanation.

Have you ever had your mining credentials suspended or revoked in Illinois or any other state or ever been denied mining credentials in Illinois or other States? Yes No

Candidate's signature

Subscribed and sworn to before me this day of, 20

(Notary Public)

TRAINING AND EXPERIENCE QUESTIONNAIRE

1. What is the extent of your education? _____

2. What special training in the mining profession have you taken? _____

3. Do you hold a certificate of qualification as a miner, issued by the Miners' Examining Board of Illinois? _____

4. What certifications of competency issued by the State Mining Board of Illinois do you now hold? _____

5. What certificates of competency issued by another State do you now hold? _____

6. At what mine and in what capacity are you employed at the present time? _____

7. List names of the coal companies/mine construction properties by which you have been employed during the past ten years, giving name and address of each and the capacity in which you were employed by each company/project.

| Name | Address | Job Capacity |
|-------|---------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
8. Have you completed training in first aid to the injured as prescribed by either the Department of Natural Resources, Office of Mines and Minerals or other accredited institution? _____
Where: _____ When: _____

PLEASE IDENTIFY EXAMINATION TO BE TAKEN

- | | |
|---|--|
| <input type="checkbox"/> Pit Coal Loading Operations | <input type="checkbox"/> Overburden Stripping |
| <input type="checkbox"/> Reclamation Work at the Mine | <input type="checkbox"/> Drilling and Shooting |
| <input type="checkbox"/> All of the Above | |

A \$50.00 application fee made payable to Illinois Department of Natural Resources (IDNR) must be submitted along with this application.