



Application for Qualified Data Collector Status Stream Habitat Assessment (QHEI)

OFFICE USE ONLY	
QDC Number:	
Effective Date:	

Note: The questions below are based on the requirements in Ohio Administrative Code Rule 3745-4-03. Applicants should be familiar with the contents of that rule prior to completing this application. Additional information is available at <http://www.epa.ohio.gov/dsw/volunteermonitoring/index.aspx> or by calling (614) 644-3635.

For which QDC level are you applying? Level 2 Level 3

Applicant Information

Name:		
Mailing Address:		
City:	State:	Zip: -
Phone: () -	Fax: () -	E-mail:

Affiliation(s) (if applicable) Will you collect data as part of your job? as a volunteer?

List the affiliation(s) (employer or volunteer organization) for which you expect to collect data:

Education

Highest Degree Earned:	Date Earned: / /
Major:	Minor:
School:	

List all undergraduate and graduate core course work in aquatic invertebrate zoology, limnology, aquatic biology, environmental sciences or a related discipline. (Attach additional pages if necessary.)

General Knowledge

Do you have a general knowledge of stream and riverine physical forms and habitat features? Yes No

If **Yes**, how was it acquired? (Check one or more.)

Undergraduate or graduate level course work (List courses in Education Section.)

Other, describe:

Training		
Have you attended training and achieved a passing mark in the qualitative habitat evaluation index (QHEI) testing offered by Ohio EPA or a person authorized under OAC Rule 3745-4-03(E) to provide such training? QHEI <input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>(Attach copy of official training certification or other documentation.)</i>		
If Yes , date you attended the training(s): QHEI / /		
Organization or person who administered the training:		
Mailing Address:		
City:	State:	Zip: -
Phone: () -	Fax: () -	E-mail:

Other
Describe any other experience, education, training and other factors that qualify you as a quality data collector. <i>(Attach additional pages if necessary.)</i>

Certification
I certify that all information submitted in support of this application is true, accurate, and complete and that I have not been convicted of or pleaded guilty to a violation of section 2911.21 of the Revised Code (criminal trespass) or a substantially similar municipal ordinance within the previous five years.
Signature: _____ Date: / /

Mail completed application and supporting information to:
Ohio EPA - DSW/Credible Data Program
P.O. Box 1049, Columbus, OH 43216-1049