



Continuing Education Information

Indiana Department of Environmental Management, Drinking Water Branch, Office of Water Quality has approved 10 general contact hours for the 2025 WWETT Show.

CE Approval Number: PWSG24-8933

CEU Process:

- ***Attendee must be pre-registered for each session they would like credit for and scanned at the door to receive Certificates of Completion.***
- WWETT will send your attendance records to Indiana DEM, Office of Water Quality if you:
 - Register for each session (preselect your classes) you want credit for.
 - Include your Indiana certification number when you register for the show in the Continuing Education section.
 - **Print the attached credit report (on second page of this approval) and bring it with you to the show. Complete the yellow highlighted sections of the form on site and return it to any door monitor at the WWETT Show. THIS FORM ONLY NEEDS TO BE COMPLETED ONCE. If you do not return this to a WWETT Show door monitor or staff member, your credits cannot be guaranteed. If you forget to print/bring a copy of this form with you to the show, let a staff member know on site and one can be printed for you.**
- Attendees can access/download their WWETT Show Certificates of Completion in the Registration Resource Center within four weeks of the conclusion of the WWETT Show.
- Attendees should download or print earned certificates and keep on file for their own records.



**PUBLIC WATER SUPPLY DRINKING WATER OPERATOR
CONTINUING EDUCATION CREDIT REPORT**

State Form 45674 (R / 08-2005)
Pending Approval by State Board of Accounts
327 IAC 8-12-7.6 Edition 2003
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
DRINKING WATER BRANCH

To ensure proper credit, the
Indiana Drinking Water approval
number **MUST** be submitted on the
form.

Indiana Drinking Water Approval Number

PWSG24-8933

Maximum Credit Hours

**Ten (10) general
contact hours**

Mail to: Indiana Department of Environmental Management
OWQ Drinking Water Branch - Mail Code 66-34
100 N. Senate Avenue
Indianapolis, IN 46204-2251

INSTRUCTIONS: To ensure proper credit, print legibly

This form must be completed in order for the attendee to get credit. Be sure to record the certification number and class/grade for each certification for which you are requesting credit.

Mail the original form to IDEM at the above address. The Training Provider must retain a copy of the completed form for their records in accordance with 327 IAC 8-12-7.6.

Since this is a form of attendance verification, it is requested that this form be distributed during the latter portion of the training session. No credit will be considered when original signatures are not shown.

Name of certified operator		Mailing address (number and street):	
City:	State:	ZIP code:	Work telephone number: ()
<input type="checkbox"/> Check here if this is a change of address.			Home telephone number: ()

Title of training course: 2025 WWETT Show

Name of organization offering the course: Informa Markets

Number of contact hours approved for the course: Ten (10) General

CREDIT APPLIED TO DRINKING WATER:

Operator certification number:	Class/Grade:	Expiration Date:

Date Attended: **(Required)** Location attended:

Number of contact hours attended and verified: **(Required)**

Signature of instructor or training provider: **(Required)**

Signature of drinking water operator: **(Required)**