

# Request for Certified Iowa Municipal Sanitary Landfill Operator Continuing Education Units

**Chapter 113.8(6)i(6) of the Iowa Administrative Code states: "All activities for which continuing education credit will be granted must be related to the subject matter of the particular certificate to which the credit is being applied."**

**If course topics meet one or more of the subject areas below, Iowa DNR will award 1 CEU for every hour in class.**

**Conference/Seminar/Training Course Title:** \_\_\_\_\_

**Date of Request:** \_\_\_\_\_ **Date & Place Held:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Please check the subject matter below for which the CEU(s) is being requested. Please include in the "comments/rationale" portion on the back side of this form a brief description of how the coursework relates to the subject area(s). Attach any supporting documentation, such as course description, conference/workshop agenda, etc. that would assist the Department in making a determination of coursework applicability. Time spent touring facilities or listening to guest speakers at luncheons may be eligible for CEU credits but only for the portion of the event that pertains to the subject area(s) below.**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Description of types of waste | <input type="checkbox"/> Interpreting and using engineering plans | <input type="checkbox"/> Construction surveying techniques |
| <input type="checkbox"/> Waste decomposition process   | <input type="checkbox"/> Geology and hydrology                    | <input type="checkbox"/> Landfill design                   |
| <input type="checkbox"/> Landfill operation            | <input type="checkbox"/> Environmental monitoring                 | <input type="checkbox"/> Applicable laws and regulations   |
| <input type="checkbox"/> Permitting processes          | <input type="checkbox"/> Leachate control and treatment           |  |

**FOR DNR USE ONLY**

<input type="checkbox"/> Approved  <input type="checkbox"/> Not Approved	<b>CEUs Proposed:</b> _____  <b>CEUs Awarded:</b> _____	_____ <b>Signature</b>	_____ <b>Date</b>
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Send completed form by local mail, email or fax to Casey Coppi, Iowa DNR, 502 E. 9<sup>th</sup> Street, Des Moines, IA 50319  
 ph: (515) 281-6581 fax: (515) 281-6794 [casey.coppi@dnr.iowa.gov](mailto:casey.coppi@dnr.iowa.gov)

**COMMENTS / RATIONALE:**

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