



**CONTINUING EDUCATION COURSE APPROVAL  
APPLICATION FOR INDIANA WATER WELL DRILLER  
AND PUMP INSTALLER LICENSE**

State Form 54444 (11-10)

INDIANA DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF WATER  
402 W. Washington St., Room W264  
Indianapolis, IN 46204-2641

Mail completed form to address above.

**REQUIRED STANDARDS-** For approval, the following standards must be met for each Continuing Education Course pursuant to IC 25-39-3-2 and IC 25-39-4-9.

1. An application should be submitted AT LEAST thirty (30) days prior to scheduled date of course; the Department will approve or deny an application for approval of a continuing education course within ten (10) business days.
2. Subject matter should relate to water well construction, pump installation & repair, grouting, water sample collection, contamination, & other topics the Department determines to be relevant for the continued improvement of the knowledge of the license holder.
3. An **agenda or course outline** showing the duration of the course, listing of instructors, including start and end time, topics, break time, lunch, tour, any fees, etc, must be submitted.
4. Written verification **of course completion** must be provided to all participants in the course.
5. The applicant should also provide a complete listing of participants to the Division of Water not more than forty-five (45) days after course offering on the form provided. (State Form 54446, "Continuing Education Course Report")

**I. APPLICANT INFORMATION**

Name of Organization or Company National Ground Water Association			
Telephone Number 614-898-7791	Work Number 614-682-6766		Cell/Home Number
Name of Contact Barbette Culpepper		Title Special Project Coordinator	Fax Number 614-898-7786
Mailing Address 601 Dempsey Road		City Westerville	State OH
E-mail Address bculpepper@ngwa.org		Website www.ngwa.org	ZIP Code 43081
Date (month, day, year) 10/23/2018			
Submitted by (if other than the sponsoring organization):			
Name		Name of Company	
Mailing Address			
Fee Charged for Course: \$175 member / \$300 none member	Maximum Number of Participants: n/a		E-mail Address
Telephone Number	Work Number		Cell/Home Number

**DO NOT WRITE IN THIS AREA**

Approved:  Yes  No Approval Code: 18-023 Date: 10/25/18

Expiration Date: **Day after Program Ends** CEU Hours Approved: 39.5 hrs

Approval Code: WD|PI

Indiana Department of Natural Resources  
Continuing Education Course Approval Application

**II. COURSE INFORMATION** - Submit or attach the following information on each educational course for which approval is desired. Reference to attachments may be noted in the appropriate space.

1. Course Name 2018 Groundwater Week
2. Number of Water Well Driller License or Water Well Pump Installer License Continuing Education Units (CEU) requested 18 hour (1.8) (excluding breaks, lunch, travel time, etc.)
3. Course Offering Date (s) December 3-6, 2018
4. Location Where Course will be Offered Las Vegas Convention Center; 3150 Paradise Road, Las Vegas, NV 89109
5. Course Description: Include how this training relates to water well construction, pump installation & repair, grouting, water sample collection, or contamination of water supplies. Other subject matter will be considered on a case by case basis. Use additional sheet(s) if necessary.  
Please see the supporting documentation.

6. List the instructional materials used for the course.  
PowerPoint presentation, possible samples, demonstrations, examples, and handouts.

7. Attendance Monitoring and Verification (Check all that apply)

- Sign In and Out
- Badge Scanning
- ID Verification
- Other Attendance verification coding

8. Criteria or performance measurement used to determine a participant's course completion? (Check any or all that apply)

- Attend and participate in each session
- Pass course ending quiz or exam
- Satisfactorily perform a learned technique or skill
- Other

9. This course will be offered on a regular basis.

- Yes
- No
- Do not know

If yes, approximate repeat offering

- Every 6 months or less
- Every 6 -12 months
- Over 12 months

10. Has this course been approved before?

- Yes
- No
- Do not know

**III. INSTRUCTOR INFORMATION**

Other Attachment (s): Write in the open space below or attach any additional information about the course.

1. Name of Instructor(s)	Title
See supporting documentation	
_____	_____
_____	_____
_____	_____

Questions or concerns should be directed to the

Division of Water  
402 W Washington St Rm: W264  
Indianapolis, IN 46204-2641  
Telephone number: 317-232-4160  
Fax number: 317-233-4579