

NORTHWEST COUNCIL OF ENGINEERING LABS INSPECTOR TRAINING PROGRAM

WAQTC PRACTICAL EXAM REGISTRATION FORM FOR LACEY – NOVEMBER & DECEMBER

CERTIFICATIONS OFFERED

- Aggregate Testing Technician (AgTT)
- Asphalt Testing Technician II (AsTTII)
- In-Place Density Testing Technician (DTT)
- Embankment & Base Testing Technician (EBTT)
- Embankment and Base/In-place Density (EBTT/DTT)
- Sampling and Reduction (SRTT)
- WAQTC TM15
- WSDOT T 813
- AASHTO T304
- AASHTO T106

REGISTRATION REQUIREMENTS

Written Exam Requirement

- The **written exam must be completed before registering for the practical exam.**
- Written exams are administered by Kryterion, a third-party testing provider. NWCEL does not administer written exams and is not affiliated with Kryterion. For questions regarding the written exam, please contact WSDOT or Kryterion directly.
- The written exam fee is \$94 per attempt and is separate from the practical exam fee.
- Schedule your written exam here: [WebAssessor](#)

Practical Exam Registration

- Only register for the practical exam **after passing the written exam.**
- **Important:** The practical exam must be completed within **90 days of passing the written exam.**
- **Steps to Register:**
 1. **Complete** this practical exam registration form.
 2. **Process payment** online through [NWCEL Registration](#) using Invoice No. WAQTCL10-12
 3. **Submit all required documents** to thanh@nwcel.org and randy.mawdsley@socotec.us;
 - a. Completed registration form
 - b. Payment receipt
 - c. Written exam results (**must be forwarded from the original results email**)
- **Incomplete registrations will not be accepted.**
- Practical exam dates and times will be scheduled **after the completed registration, payment, and written exam results have been received and verified.**

Change & Cancellation Policy

- Changes to registration (candidate name, session, or certification type) will incur a \$100 change fee.
- Refund Policy:
 - **Full refund** if canceled **at least 1 month** before the exam date.
 - **50% refund** if canceled **at least 2 weeks** before the exam date.
 - **No refund** if canceled **within 2 weeks** of the exam date.

Exam Details	AgTT	AsTTII	DTT*	EBTT	DTT/EBTT*	SRTT	TM15**	T813	T304	T106**
Exam Cost	\$550	\$650	\$550	\$550	\$650	\$450	\$350	\$350	\$350	\$300
Time Allotted (Hrs)	3.00	6.00	4.00	4.00	5.00	4.00	4.00	3.00	3.00	3.00
Location	AAR Testing and Inspection in Lacey or Redmond, or Construction Testing Lab in Puyallup									

Note: If an examination requires time beyond the allotted hours listed above, an additional fee of \$165 per hour will apply.

* DTT and DTT/EBTT include the WSDOT SOP 615 test method.

** TM15 and T 106 practical exams will be conducted at the examinee's laboratory. The laboratory is responsible for providing the required setup, materials, and equipment used during the examination.

NORTHWEST COUNCIL OF ENGINEERING LABS INSPECTOR TRAINING PROGRAM

WAQTC PRACTICAL EXAM REGISTRATION FORM FOR LACEY – NOVEMBER & DECEMBER

CONTACT INFORMATION

Company: _____ Name: _____ Phone No.: _____
Email: _____ Technical Director Email: _____ Member? _____

STUDENT REGISTRATION

The information below must be filled out completely. Phone number and home address are used for the Rights and Responsibilities Agreement. See example in red below:

First Name: <u>JANE</u>	Middle Name: <u>JOHN</u>	Last Name: <u>DOE</u>	Address: <u>5000 N 85TH STREET, APT 2, SEATTLE, WA</u>
Phone No: <u>253-681-5812</u>	Email: <u>JDOE@GMAIL.COM</u>	WAQTC ID: <u>60335, OR N/A</u>	☐ AgTT ☐ AsTTII ☐ DTT ☐ EbTT ☐ DTT/EBTT ☐ SRTT ☐ TM15 ☐ T813 ☐ T304 ☐ T106

First Name: _____	Middle Name: _____	Last Name: _____	Address: _____
Phone No: _____	Email: _____	WAQTC ID: _____	☐ AgTT ☐ AsTTII ☐ DTT ☐ EbTT ☐ DTT/EBTT ☐ SRTT ☐ TM15 ☐ T813 ☐ T304 ☐ T106

First Name: _____	Middle Name: _____	Last Name: _____	Address: _____
Phone No: _____	Email: _____	WAQTC ID: _____	☐ AgTT ☐ AsTTII ☐ DTT ☐ EbTT ☐ DTT/EBTT ☐ SRTT ☐ TM15 ☐ T813 ☐ T304 ☐ T106

First Name: _____	Middle Name: _____	Last Name: _____	Address: _____
Phone No: _____	Email: _____	WAQTC ID: _____	☐ AgTT ☐ AsTTII ☐ DTT ☐ EbTT ☐ DTT/EBTT ☐ SRTT ☐ TM15 ☐ T813 ☐ T304 ☐ T106

First Name: _____	Middle Name: _____	Last Name: _____	Address: _____
Phone No: _____	Email: _____	WAQTC ID: _____	☐ AgTT ☐ AsTTII ☐ DTT ☐ EbTT ☐ DTT/EBTT ☐ SRTT ☐ TM15 ☐ T813 ☐ T304 ☐ T106