VERIFICATION OF CONTINUING COMPETENCY FORM WEST VIRGINIA TRANSPORTATION ENGINEERING TECHNICIAN CERTIFICATION BOARD https://transportation.wv.gov/highways/wvtret/Pages/default.aspx Certification # First Name Certification Year Ending: 12/31/25 Level **Last Name** 1. CONTACT INFORMATION Home Address **Employer** Work Address City State, Zip Work City Work State, Zip Home Phone Work Phone 2. TDH CONFIRMATION (List TDH's claimed from events completed between January 1, 2024 and December 31, 2025) DON'T TDH'S WRITE IN NAME OF EVENT **LOCATION OF EVENT CLAIMED SPACE** DATE **CARRYOVER TDH'S FROM 2022-2023** (24 TDH's are required to become compliant) TOTAL TDH'S CLAIMED 2024-2025 (Limit of 12 TDH's) TDH'S TO CARRYOVER 2026-2027 To assure prompt processing return this form without delay Online payments can be made by following the instructions on the link listed below: Email: DOHWVTRETBoard@wv.gov https://transportation.wv.gov/highways/wvtret/Do cuments/Online-Payment-Letter.pdf WV Transportation Engineering Technician Certification Board 1900 Kanawha Blvd. East Building 5, Room A-450 If you pay online, please include your payment Charleston, WV 25305 confirmation sheet with your form. **Attention: Kimberly Ballard** PLEASE DO NOT ATTACH ANY ADDITIONAL DOCUMENTS WHEN RETURNING THIS FORM! 3. SIGNATURE AND DATE (REQUIRED) I certify that the information provided on this form is correct, factual, and complete. I understand that any misrepresentation of information can result in the rejection of this form and the revocation of any/all WV TRET certifications issued in my name. I further certify that I have read and understand the Board's Qualifications and Guidelines. I accept the conditions set forth; and I have accurately documented TDH's in accordance with Section V (Continuing Education Requirements) of the Qualifications and Guidelines. I understand that I may be asked to submit documentation supporting my TDH's as a requirement for verification. Signature: Date: