

VERIFICATION OF CONTINUING COMPETENCY FORM

WEST VIRGINIA TRANSPORTATION ENGINEERING TECHNICIAN CERTIFICATION BOARD

<https://transportation.wv.gov/highways/wvtret/Pages/default.aspx>

Certification #	<input style="width: 95%;" type="text"/>	First Name	<input style="width: 95%;" type="text"/>	MI	<input style="width: 95%;" type="text"/>
Certification Level	<input style="width: 95%;" type="text"/>	Last Name	<input style="width: 95%;" type="text"/>	Year Ending: 12/31/27	

1. CONTACT INFORMATION

Home Address	<input style="width: 95%;" type="text"/>	Employer	<input style="width: 95%;" type="text"/>
City	<input style="width: 95%;" type="text"/>	Work Address	<input style="width: 95%;" type="text"/>
State, Zip	<input style="width: 95%;" type="text"/>	Work City	<input style="width: 95%;" type="text"/>
Home Phone	<input style="width: 95%;" type="text"/>	Work State, Zip	<input style="width: 95%;" type="text"/>
Email	<input style="width: 95%;" type="text"/>	Work Phone	<input style="width: 95%;" type="text"/>

2. TDH CONFIRMATION (List TDH's claimed from events completed between January 1, 2026 and December 31, 2027)

NAME OF EVENT	LOCATION OF EVENT	DATE	TDH'S CLAIMED	DON'T WRITE IN SPACE
CARRYOVER TDH'S FROM 2024-2025				
(24 TDH's are required to become compliant) TOTAL TDH'S CLAIMED 2026-2027				
(Limit of 12 TDH's) TDH'S TO CARRYOVER 2028-2029				

To assure prompt processing return this form without delay to:

Email: DOHWVTRETBoard@wv.gov or

WV Transportation Engineering Technician Certification Board
 1900 Kanawha Blvd, East
 Building 5, Room A-450
 Charleston, WV 25305
 Attention: Kimberly Ballard

Online payments can be made by following the instructions on the link listed below:

<https://transportation.wv.gov/highways/wvtret/Documents/Online-Payment-Letter.pdf>

If you pay online, please include your payment confirmation sheet with your form.

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: