Proof Of Experience

INSTRUCTIONS: Type or print all information clearly. Complete this form to verify that an applicant has experience which makes him/her eligible for Lead Certification. This form <u>must</u> be completed and signed by a supervisor or employer, or by the applicant, if self-employed. Provide information for only <u>one</u> employer on this form.

Applicant Informat	ion:						
Name:	Last		First		Middle Initial		
Employer Informati	ion:						
-							
Address:							
	Street Address, Suite. No.						
·	City			State	Zip		
If applicant is <u>not</u> self-en	nployed, give his/her Supe	ervisor's name and ph	none number:				
Supervisor Name:	First	Last	F	Phone: ()			
	yed, give the names and						
Client Name:				Phone: ()		
	First						
Client Name:	First	Last	F	² hone: ()			
Client Name:		Last	F	Phone: (
	the job activities the a			ke him/her elic	ible for Lead-R		
Construction certification	ation. (This may include						
occupational safety,	etc.).						
-					OV		

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0	In a typical work week, what percer	nt of the time did the app	olicant do these, and a	ny associated job activitie	es:%	
I hereby	y certify, under penalty of perjury, that	the information I have p	rovided in this docume	ent is true and correct.		
Employ	er/Supervisor Signature:					
(or Applic	ant's Signature, if self-employed)				/	
Employer/Supervisor Name:						
(or Applic						
	Include this form	with your applicatio	n for lead certificat	tion (CDPH 8488)		

The Department of Public Health, Childhood Lead Poisoning Prevention Branch, requests this information under the Health & Safety Code, Section 105250, in order to determine the eligibility of an individual for Lead Certification. Provision of this information is mandatory. The consequence of not providing this information is denial of certification. This information may be provided to the California Division of Occupational Safety and Health (Cal-OSHA) and California government agencies and officials, as provided by law. You have the right to access records containing your personal information maintained by the Department of Public Health. For information or access to your records, contact the Childhood Lead Poisoning Prevention Branch, 850 Marina Bay Parkway, Building P, Third Floor, Box C, Richmond, CA 94804-6403, Telephone: 1-800-597- LEAD (510-620-5694 outside California).

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