



New Jersey Agricultural
Experiment Station

Office of Continuing Professional Education
New Jersey Agricultural Experiment Station
Rutgers, The State University of New Jersey
102 Ryders Lane
New Brunswick, NJ 08901-8519

www.cpe.rutgers.edu
ocpe@njaes.rutgers.edu

848-932-7207
Fax: 732-932-1187

Application for Admission New Jersey Recycling Certification Series (Alternate Certification Series)

Parts One and Two of this form must be fully completed by the applicant. Part Three must be completed and signed by a supervisor or other individual who can verify the position, duties and workplace experience of the applicant. If the applicant's experience was gained through more than one position or employer, Part Three should be completed and signed by each relevant person. Once submitted, the form will be reviewed by members of the Advisory Committee for the Recycling Certification Series. If you have questions on the form or the type of information being requested, please contact Carol Broccoli at (848) 932-7207 (carolbr@rutgers.edu).

NOTE: If you are a Certified Recycling Professional (CRP) whose certification has lapsed, please provide contact information and complete Part Two only.

Part One – Applicant Contact Information

NAME:

EMPLOYER:

MAILING ADDRESS:

OFFICE PHONE:

CELL PHONE:

EMAIL ADDRESS:

JOB TITLE:

Part Two – Applicant Recycling Background and Operational Experience

Total Recycling Related Experience (in years): _____

Recycling Related Experience with Current Employer: (in years) _____

Please describe specific duties and job responsibilities performed. Be sure to note if these are in your current position or occurred in a previous one. If you do not have experience in a given area, please enter "Not Applicable." Attach additional sheets if needed.

- FIELD OPERATIONS (material collection/pickup, placement of recycling receptacles, equipment operation and maintenance)
- OFFICE OPERATIONS (Recordkeeping, personnel management, etc.)
- REQUIRED REPORTING AND FILINGS (have completed required reports such as the annual Municipal Tonnage Grant filing or the semi-annual E-Waste Recycling Report?)
- NEGOTIATION/DEVELOPMENT OF RECYCLING AND/OR SOLID WASTE RELATED CONTRACTS
- ROUTING OF COLLECTION VEHICLES
- BUDGETING (including calculating program income and expenses)
- DEVELOPMENT AND ENFORCEMENT OF RECYCLING AND/OR SOLID WASTE REGULATIONS OR ORDINANCES

- COMMUNICATING WITH RESIDENTS OR OTHER CONSTITUENTS (written and oral)
- DEVELOPMENT OF RECYCLING OUTREACH AND INFORMATIONAL MATERIALS
- OTHER RELEVANT EXPERIENCE (please describe in detail; use additional sheets as needed)
- DO YOU HOLD ANY PROFESSIONAL LICENSES OR CERTIFICATIONS? (please include certification date and number, if applicable).

NJ Certified Recycling Professional (lapsed) _____

NJ Certified Public Works Manager _____

NJ Health Officer/REHS _____

NJ Registered Municipal Clerk _____

NJ Qualified Purchasing Agent _____

Other (please list)

To the best of my knowledge, I certify the information I have provided on this statement of qualifications and any additional attachments is factual and accurate.

Print Name _____ Signature _____ Date _____

Part Three – Verification of Applicant Background and Operational Experience

To the best of my knowledge, I certify the information provided by the applicant on this statement of qualifications and any additional attachments is factual and accurate.

Print Name _____ Signature _____ Date _____

Relationship to Applicant: _____

Employer and Job Title: _____

Telephone and E-mail: _____

Do you hold any professional licenses or certifications? If so, please list with title(s) and date(s) of initial certification.

Any additional comments/statements: