



Candidate Registration #
(CEA Office use)

STEAM BOILER WATER TREATMENT TRAINING APPLICATION

MANDATORY INFORMATION – Complete all unshaded boxes in block capitals

CANDIDATE'S PERSONAL DETAILS

Surname		<p>Attach ID Card Photo here.</p> <p>Please ensure that it is either glued or stapled such that the staples are not actually on the image.</p> <p>PLEASE WRITE YOUR NAME ON THE BACK OF LOOSE PHOTOGRAPHS.</p> <p>The Trainer will verify the likeness of the photograph and candidate's signature.</p> <p>The identity of the Candidate will be checked by the Trainer. Formal identification of photo likeness will be by passport, driving licence or currently valid photographic identity card.</p> <p>Confirmation of the candidate's address will be by a different document to that listed above, including council tax demand or utility bill (must be less than 6 months old), or driving licence.</p> <p>Any queries regarding identity checks must be directed to the CEA for clarification.</p>
Forename(s)		
Date of Birth		
Home Address		
Town		
Postcode		
Country		
Home Tel		
Mobile		
e-mail		

CANDIDATE'S EMPLOYER DETAILS

Candidate's Position in Company			
Employer			
Address			
Candidate's Manager's Name and Position			
Office Telephone		Manager's Mobile	
Manager's e-mail			



Candidate Name

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YOUR APPLICATION CANNOT BE PROCESSED WITHOUT COMPLETING THIS SECTION

APPLICATION CATEGORY - tick below or add details as required

BOAS ID NO (If applicable)

New applicant

Renewal of Certificate
give existing cert no. and date of expiry

TRAINING PROVIDER NAME

Candidate evidence declaration

TICK

1	I enclose a brief cv (one page) indicating my current or recent employment relating to steam plant, my responsibilities relevant to that plant, and my line management reporting route	
2	I confirm that I have undertaken at least 15 hours of practice testing water samples on steam plant	
3	I confirm that I have read BG01 and BG04 and have an awareness of the requirements of INDG436 and the Pressure Systems Safety Regulations (PSSR).	

NOTES:

I consent to all personal information provided in this form to be used for the sole purpose of SBWT. Data Protection Act. The CEA and the Training Provider will hold your details in accordance with the Data Protection Act 1998. Data will be used for Training purposes as part of the scheme requirements. Information relating to Operative competence and registration will be available to the public or any other parties with a legitimate interest. All documentation provided by SBWT candidates will be destroyed after the 6th year anniversary of their certification unless a candidate has renewed when their details will be retained for a further 6 year period.

This fully completed form must returned together with your purchase order and/or payment to your Training Provider who will include in their invoice the CEA Administration fees as shown on the CEA website.

Medical or Special requirements: Should you have any medical condition that may affect the way you work or the assessment process or any other special requirements please provide details on a separate sheet.

Candidate's Signature on application		Date	
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