

**Application for Qualified Data Collector Status  
Benthic Macroinvertebrate Biology**

OFFICE USE ONLY	
QDC Number:	
Effective Date:	

Note: The questions below are based on the requirements in Ohio Administrative Code Rule 3745-4-03. Applicants should be familiar with the contents of that rule prior to completing this application. Additional information is available at [epa.ohio.gov/dsw/credibledata/index.aspx](http://epa.ohio.gov/dsw/credibledata/index.aspx) or by calling (614) 644-3635.

**A QDC may choose to specialize in benthic macroinvertebrate sample identification or in sample collection and data evaluation. Alternately, a QDC may be certified in both categories. For which QDC level are you applying?**

- Level 2
  Level 3 Collection & Data Evaluation Only  
 Level 3 Sample Collection, Identification & Data Evaluation
  Level 3 Identification Only

Applicant Information			
Name:			
Mailing Address:			
City:	State:	Zip:	-
Phone: ( ) -	Fax: ( ) -	Email:	

<b>Affiliation(s)</b> (if applicable)	Will you collect data as part of your job? <input type="checkbox"/>	as a volunteer? <input type="checkbox"/>
List the affiliation(s) (employer or organizations) for which you expect to collect data:		

Education	
Highest Degree Earned:	Date Earned: / /
Major:	Minor:
School: (Attach copy of official transcript)	
List all undergraduate and graduate core course work in aquatic invertebrate zoology, limnology, aquatic biology, environmental sciences or a related discipline. (Attach additional pages if necessary)	

<b>General Knowledge</b>
Do you have a general knowledge of stream and riverine physical forms and habitat features? <input type="checkbox"/> Yes <input type="checkbox"/> No
If <b>Yes</b> , how was it acquired? ( <i>Check one or more</i> )
<input type="checkbox"/> Undergraduate or graduate level course work ( <i>List courses in Education Section</i> )
<input type="checkbox"/> Other, describe:

<b>Specialized Knowledge</b> ( <i>Attach additional pages if necessary</i> )
a. Do you have knowledge of and the ability to accurately use macroinvertebrate taxonomic references and dichotomous keys to identify Midwestern aquatic macroinvertebrates:
to the level of family? <input type="checkbox"/> Yes <input type="checkbox"/> No
to the level of taxonomy used by Ohio EPA? <input type="checkbox"/> Yes <input type="checkbox"/> No
If <b>Yes</b> , how was it acquired? ( <i>Check one or more</i> )
<input type="checkbox"/> Undergraduate or graduate level course work ( <i>List courses in the Education Section</i> )
<input type="checkbox"/> Other, describe:
b. Do you have knowledge of Ohio EPA macroinvertebrate field sampling, laboratory analysis and data assessment procedures? ( <i>Level 3 application only</i> ) <input type="checkbox"/> Yes <input type="checkbox"/> No
If <b>Yes</b> , how was it acquired?

<b>Training</b>
a. Have you achieved a passing mark in a macroinvertebrate taxonomic identification examination administered by Ohio EPA or a person authorized under OAC Rule 3745-4-03(E) to administer such an examination? ( <i>Level 2 application only</i> ) ( <i>Attach a copy of official examination certification if test <b>not</b> administered by Ohio EPA</i> )
<input type="checkbox"/> Yes <input type="checkbox"/> No
Organization or person who administered the examination:
Mailing Address:
City: _____ State: _____ Zip: _____
Phone: ( ) - _____ Fax: ( ) - _____ Email: _____

b. Have you attended training and achieved a passing mark in the biocriteria certification testing for macroinvertebrates offered through the voluntary action program for certified professionals, or an equivalent training program offered by Ohio EPA or a person authorized under this chapter to administer such training?  
*(Level 3 application only) (Attach copy of official training certification if training not administered by Ohio EPA)*

Yes       No

Organization or person who administered the training:

Mailing Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ -

Phone: (    )    -      Fax: (    )    -      Email: \_\_\_\_\_

**Experience**

Applicants may attach a resume or curriculum vitae if it provides the information requested below.

Check here if resume or curriculum vitae is attached.

Alternatively, applicants should list and briefly describe experiences that total at least two years in each of the following three areas. Specify full-time or part-time and dates specific to the pertinent experiences.

a. Describe any practical experience you have in the identification of aquatic macroinvertebrates.  
*(Attach additional pages if necessary)*

Employer or School Name:

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: (    )    -

Dates of Employment:

Name of Supervisor:

Pertinent Experience:

b. Describe any practical experience you have in environmental assessment work. *(Attach additional pages if necessary)*

Employer or School Name:

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: (    )    -

Dates of Employment:

Name of Supervisor:

Pertinent Experience:

c. Describe any practical experience you have involving work in developing biological water quality sampling and analysis plans, quality assurance plans and data quality objectives processes. OAC 3745-4-03 requires at least two years of experience. *(Attach additional pages if necessary.)*

Employer or School Name:

Address:

City:	State:	Phone: ( ) -
-------	--------	--------------

Dates of Employment:

Name of Supervisor:

Pertinent Experience:

**Other**

Describe any other experience, education, training and other factors that qualify you as a qualified data collector. *(Attach additional pages if necessary)*

**Certification**

I certify that all information submitted in support of this application is true, accurate, and complete and that I have not been convicted of or pleaded guilty to a violation of section 2911.21 of the Revised Code (criminal trespass) or a substantially similar municipal ordinance within the previous five years.

Signature: \_\_\_\_\_ Date: / /

Mail completed application and supporting information to:  
 Ohio EPA - DSW/Credible Data Program  
 P.O. Box 1049, Columbus, OH 43216-1049