



# WSDOT Bridge/Tunnel Inspector Experience and Training Record

Applicant for Bridge/Tunnel Inspector Certification	Date
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Organization
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<b>Education</b>			
Institution	Major	Years	Degree

<b>Professional Registration</b>		
State	Branch/Agency	Registration Number

<b>Bridge/Tunnel Inspection Training</b>			
Course	Hours	Sponsor	Dates

<b>Special Technical Course</b>			
Course	Hours	Sponsor	Dates

<b>Bridge/Tunnel Inspection Experience</b>		
Organization	Bridge Duties	Years

To the best of my knowledge, the above information is true and accurate.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Having reviewed the above information, I conclude that this individual meets the minimum qualifications for a bridge/tunnel inspection team leader as specified in the current National Bridge Inspection Standards and National Tunnel Inspection Standards.

Team Leader's Signature \_\_\_\_\_ Date \_\_\_\_\_

Team Leader's Name (Print) \_\_\_\_\_ Title \_\_\_\_\_