July 2023 to June 2024 Water System Operator Reimbursement Program Utility/City Reimbursement Form

Please complete this form to request reimbursement for training courses and/or travel costs.

A maximum of \$1,000 per fiscal year is reimbursable for cost associated with training.

Name of City/Utility/Employer:

Course: Copies of the course co	mpletion certificates.	
Name of Course Sponsor:		
Name of Course:		
Dates of Course:		
	el costs are eligible for reimbursement. All receipts m oursable (this list is not comprehensive): per diem, re	
Operator Name	Explanation of Reimbursable Costs	Cost per Operator
Total Actual Costs:		
FOR DEC USE ONLY		
	VCN:	
Actual Course Fee: Reimbursable Costs:	Actual Travel/Lodging Costs:	
	ate: VVWDW15 Phase: VVWDWO2 Phase:	
Course Fee:	Object Code: 3000	
	object Code: 2010	
Total Reimbursable	e Costs:	
Program Approval:	Date:	
Financial Approval:	Date:	

Reimbursement Checklist: Copy of Course Completion Certificate Attached Copy of Course Fee Receipt Attached Copy of All Travel Receipts Attached, if applicable Signature: I hereby certify that the information provided on this form is true and complete to the best of my knowledge and belief. I further understand that I may not receive reimbursement if funding has been exhausted.

Signature of Operator or System Representative

Date

ALL REIMBURSEMENT FORMS MUST BE POSTMRKED OR SUBMITTED BY JUNE 1, 2024.

IF YOU ARE ATTENDING A TRAINING IN THE MONTH OF JUNE, YOU MUST REQUEST AN EXTENSION OF THE DEADLINE FROM THE OPERATOR CERTIFICATION PROGRAM.

Please mail this form and all the required documentation to:

Alaska Department of Environmental Conservation P.O. Box 111800 Juneau, AK 99811-1800

Or scan this form and all the required documentation and email to:

dec.opcert@alaska.gov



Questions?

Phone: (907) 465-1139

Email: dec.opcert@alaska.gov

