



Pavement Preservation Level 1: Micro/Slurry Seals EXPERIENCE FORM

In order to be certified by the SCDOT as a Pavement Preservation Level 1: Micro/Slurry Seals Technician, an individual needs to have a minimum level of familiarity and experience with the related test procedures, forms, specifications, and general operations. The signature on this form attests that the individual has **demonstrated** to a certified Pavement Preservation Level 1: Micro/Slurry Seals technician, Asphalt Level 3, or ART Technician (hereafter referred to as the "Rater") his/her experience in the areas indicated. This form must be submitted at least one (1) month prior to the class. Applicants without the appropriate completed experience form submitted by the deadline will have their class space forfeited. Refer to the SCDOT Technician Certification Policy at www.scdot.org for more information. This form should be submitted to:

Tri-County Technical College
Attn: SCDOT Certification
Corporate & Community Education Division
PO Box 587
Pendleton, SC 29670
Phone: (864) 646-2045 Fax: (864) 646-1894
Email: mmraovic@tctc.edu

Applicant's Name	Phone
Company	
Address	
Email	

I. General information for use in determining pavement preservation applicant's qualification:

- _____ 1. Applicant is familiar with asphalt emulsion, dry additive/mineral filler, and aggregate calibration procedures.
Rater's Initials
- _____ 2. Applicant is familiar with monitoring relative humidity, ambient air temperatures and wind velocity.
Rater's Initials
- _____ 3. Applicant has knowledge of when to use a scratch coat for filling ruts or when a rut box is required.
Rater's Initials
- _____ 4. Applicant is familiar with the current supplemental specification Micro Surfacing, Section 410.
Rater's Initials

- II. Applicant has **six months minimum** related experience in micro surfacing and slurry seal construction and testing. _____
OR Rater's Initials
 Applicant is a certified Asphalt Roadway (ART) Technician. _____
ART certification number

**SCDOT only: If applicant does not have at least 6 months experience, signature of the DCE/DME is required.*

DCE/DME Signature

*Note: Integrity is the backbone of any quality control program. By signing this form, I am certifying that I have **personally witnessed** the above individual complete the items stated and understand that the SCDOT Technician Certification Board will take action against me for any falsification of documents.*

_____ Rater's Signature	_____ Applicant's Signature
_____ Rater (Print Name)	_____ Date Signed
_____ Rater SCDOT PPL1:MS, HMA Level 3, or ART Certification No.	