

**HMA LEVEL 2s TECHNICIAN COURSE
EXPERIENCE FORM**

In order to attend the HMA Level 2s course, an individual needs to have a certain 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 Level 3 or Level 2s 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 "Policy for Required Experience for SCDOT Technician Certification" for additional information. This form should be submitted to:

CICA/Clemson University
200 Lowry Hall
Clemson, SC 29634-0912
Phone: 864-656-4183 Fax: 864-656-0124

Applicant Name _____	Company _____
Phone _____	Address _____
Alternate Phone _____	_____

I. General information for use in determining asphalt Applicant's qualification:

1. Applicant is a certified Level 1 technician. _____
Rater's Initials
2. Applicant's SCDOT Level 1 Certification No.: _____
3. Applicant has demonstrated laboratory testing of aggregates, blending, and batching. _____
Rater's Initials
4. Applicant has demonstrated the ability to make and test gyratory compactor specimens. _____
Rater's Initials
5. Applicant has demonstrated an understanding of weight-volume relationships. _____
Rater's Initials
6. Applicant is familiar with SCDOT HMA specifications. _____
Rater's Initials

II. Applicant has **six months minimum related experience in asphalt mix design.** _____
Rater's Initials

*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 Level 3 or Level 2s Certification No. _____	_____