



**** FOR "CERTIFICATION" STUDENTS ONLY ****

CSDA GPR Certification – Operator Profile

Name of Attendee: _____

Age: _____ Years of Experience: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

A. Manufacturer training completed? (circle all that apply)

GSSI Hilti Sensors & Software Other (please specify) _____

B. Please list the concrete related GPR equipment each attendee has used

a. _____

b. _____

c. _____

d. _____

The following minimum requirements must be met and verified by an owner:

- Two years field experience
- Taken and passed initial manufacturing training
- Negative drug test within 30 days of taking GPR Certification course

Verified:

Owner's Signature Date

Operator's Signature Date

Printed Name

Printed Name

*This form must be sent to the CSDA office at:
PO Box 324, St. Petersburg, FL 33731, info@csda.org or fax 727-577-5012
at least one week prior to the beginning of the GPR Certification course.*