# ILLINOIS EMERGENCY MANAGEMENT AGENCY

## APPLICATION FOR CERTIFICATION IN INDUSTRIAL RADIOGRAPHY

I Cert

Reset Form

Print Form

1. **The application must be complete and legible. Print or type all information.**
2. **Make funds payable to IEMA. Application fees are not refundable.**
3. **See web site for exam dates/forms: www.illinois.gov/iema/NRS/RadSafety/Pages/acccert.aspx**
4. **If you have any questions, please call us at 217-785-9913.**

**I.** Social Security Number _____ - _____ - _____

Name _____
Last First MI

Address _____
Number & Street

_____
City State Zip

**II.** Sex: ☐ M ☐ F Birthdate _____/_____/_____

Business Telephone # (____) _____ - _____

Home/Cell Telephone # (____) _____ - _____

Email _____

Send test results for exam via email ☐ Yes ☐ No

**III. Type of Industrial Radiography for which Certification desired**

☐ Radioactive Materials ☐ X-Ray ☐ Both

**IV. Type of Certification Required**

☐ Initial Certification **(Complete Section V below for Initial certification only)**

☐ Certification as Industrial Radiographer Trainee **(copy of letter or certificate verifying completion of training attached)**

☐ Certification By Reciprocity **(copy of current certification card attached)**

☐ Re-Certification **Enclose Fee of $125**

**V. Documentation of Minimal Work Experience (For Initial Certification Only) By RSO**

The individual listed above has, as a minimum, the following work experience :

> 200 hrs of Radioactive Material ☐ Yes ☐ No

>120 hrs X-ray: ☐ Yes ☐ No

I attest the above information is correct to the best of my knowledge.

_____
Signature of RSO

_____
Printed Name

_____
Company

_____/_____/_____
Date

**VI. Current Industrial Radiography Employment (if applicable)**

☐ Currently Employed

☐ Unemployed

☐ N/A

Employer's Name _____

Street Address _____

City _____ State _____ Zip _____

| FOR OFFICE USE ONLY | CHECK# | FEE RECEIVED |
|---|---|---|



(Rev. 5/15) #IEMA 254 (3935)

## VII. ATTESTATION

**If you answer yes to any of the following questions, please provide an explanation on a separate sheet.**

1. Have you **ever** been convicted of a felony? ☐ Yes ☐ No
2. Have you been denied or had a license/certification revoked? ☐ Yes ☐ No
3. Have you been formally notified of any complaint against you relative to performing Industrial Radiography? ☐ Yes ☐ No
4. Do you have a drug or alcohol abuse problem? ☐ Yes ☐ No
5. Are you unable to perform Industrial Radiography duties with reasonable judgment, skill and safety? ☐ Yes ☐ No
6. Have you defaulted on an educational loan guaranteed by the Illinois Student Assistance Commission? ☐ Yes ☐ No

## VIII. AGREEMENT

I hereby agree to abide by all the rules and regulations of the Illinois Emergency Management Agency, and to permit the Agency, or its duly authorized representative, at all reasonable times, to inspect my certification.

I also declare that all the data appearing is accurate and true to the best of my knowledge. I hereby authorize release of any or all educational information concerning the applicant to the Illinois Emergency Management Agency.

## IX. CERTIFICATION

I certify, under penalty of perjury, that I am not more than 30 days delinquent in complying with a child support order. Failure to certify may result in a denial of the renewal and making a false statement may subject you to contempt of court. (5 ILCS 100/10-65)

| **Signature of Applicant** | Date Application Signed |
|---|---|
| | |

## X. VIOLATIONS

Any person who practices in Industrial Radiography without the appropriate certification or who otherwise violates any provision of the Radiation Protection Act of 1990 is guilty of a Class A misdemeanor, as prescribed by 420 ILCS 40/39.

Section 39 of the Radiation Protection act of 1990 (Act), 420 ILCS 40/1 et seq., was amended effective July 30, 1997, to provide criminal penalties for certain violations.

Section 39 makes the following a criminal offense:

- Any person who knowingly makes a false material statement to a Agency employee during the course of official Agency business or in an application for accreditation, certification, registration, or licensure under the Act.
- Any person who knowingly alters a credential, certificate, registration or license issued by the Agency for the purpose of evading a requirement of the Act.
- A person who violates any part of this statutory section is guilty of a Class A misdemeanor for the first offense and is guilty of a Class 4 felony for a second or subsequent offense. 420 ILCS 40/39(b)(1)-(2).

| **FOR OFFICE USE ONLY** | **REVIEWED BY** |
|---|---|

**BEFORE YOU MAIL YOUR APPLICATION:**

1. Have all applicable questions on the application been answered?
2. Is your application signed? Have you enclosed the fee of $125 payable to IEMA?
3. If applying for certification as an Industrial Radiographer Trainee, enclose proof of completion of an approved program per Section 405.70.
4. If applying for certification by reciprocity enclose a copy of the certificate issued by another state or jurisdiction along with the $125 application fee.

Omission of any one of the required documents or incomplete information may result in a delay of your certification.

**SEND TO:**

IEMA
Industrial Radiography Certification Program
1035 Outer Park Drive
Springfield, Illinois 62704

**Questions/Assistance: 217-785-9913**
TDD: 217-782-6133

**Web Site: www.illinois.gov/iema/NRS/RadSafety/Pages/acccert.aspx**