**Saw Training and Certification Course Application**

Attending PCTA’s Saw Training and Certification Course does not guarantee certification. Certification cards will only be issued to those who exhibit safety, proficiency, and leadership using the saw.   
**Please note**: The PCTA saw program only certifies sawyers for bucking operations.

**Type of certification requested:**

\_\_\_ Crosscut saw \_\_\_ Chain saw

\_\_\_ Initial saw certification (two-day training)

\_\_\_ Advancing from A level to B level certification (two-day training)

\_\_\_ Recertification at current level; A level to A level, B level to B level (one-day training)   
  
Notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you an active PCT volunteer?** \_\_\_ Yes \_\_\_ No

*The required course materials are MTDC Chain Saw and Crosscut Saw Training Course Student’s Guidebook (99 pages) and for crosscut you will also need MTDC Saws That Sing (71 pages).*

**How would you like to receive a copy of these materials?**

\_\_\_ Print via mail \_\_\_Via Internet link to download and print yourself

**Will you be bringing your own tools and equipment or using those provided by the instructor?**

\_\_\_ Bring my own tools and equipment \_\_\_Using supplied tools and equipment

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address:

City, State, Zip:

**EMERGENCY CONTACT**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SAFETY COURSES**

**OSHA-required for saw certification. Please submit copies of your cards with application.**

CPR Certifying organization: Certification expiration date:

First Aid Certifying organization: Certification expiration date:

**NEW CERTIFICATIONS**

Why do you want to be certified?

Do you have any previous saw experience? \_\_\_ Chain saw \_\_\_ Crosscut saw

If yes, please describe:

Total seasons/years have you worked with a saw: \_\_\_\_\_

On federal lands: On state lands: On private lands:

**RECERTIFICATION – Chain saw**

Please attach a copy of your current sawyer certification card, if any.

Who was your instructor (name and agency affiliation)?

Date of previous certification (month/year): Certification expiration date:

Previous certification level: A B C

To what level were you previously certified (bucking with a size limit, bucking with no limit, felling)?

**RECERTIFICATION – Crosscut saw**

Please attach a copy of your current sawyer certification card, if any.

Who was your instructor (name and agency affiliation)?

Date of previous certification (month/year): Certification expiration date:

Previous certification level: A B C

To what level were you previously certified (bucking with a size limit, bucking with no limit, felling)?

**COMMENTS/QUESTIONS**