



Registration can be done using this form, OR online at *www.superpave.psu.edu*.

Please read and follow these directions.
INCOMPLETE APPLICATIONS WILL NOT BE
CONSIDERED FOR RECERTIFICATION.

1. Fill in or attach information as indicated and obtain required signatures when noted.
2. **If paying by check or money order, submit by mail** a separate copy of this form for each applicant and for each certification to NECEPT at the address below. Check or money orders must be included for the corresponding total fee payable to Pennsylvania State University. **Credit card payments are accepted only if paid on-line (i.e., through on-line registration).** If you register on line, you MUST pay with a credit card; you may not mail in a check or money order separately.
3. Applications that are not complete or are not accompanied with payment will be returned to the sender. (**Note:** All PennDOT employees will automatically be direct billed to the appropriate PennDOT District unless payment is enclosed with this application or a request is made to be emailed a link to pay online.)
4. All certification cards will be mailed directly to the home address listed on the application. It is up to the certified technician to give a copy of their certification card to their place of employment, if necessary.
5. Applicant should allow 3-5 weeks after NECEPT receives the completed application to receive their new certification card.

Falsification of information on this form may jeopardize your certification status.

NECEPT Contact Information:

Penn State University/The Thomas D. Larson PA Transportation Institute
NECEPT/PennDOT Technician Certification Program
201 Transportation Research Building
University Park, PA 16802
Phone: 814-863-1293
Fax: 814-865-3039
Email: superpave@psu.edu



PENNDOT
AGGREGATE RECERTIFICATION CARD
2020 APPLICATION FORM

BEFORE YOU FILL OUT THIS FORM, READ THE PRECEEDING PAGE.

◆ Enter your 2-6 Digit NECEPT ID number: _____

◆ If you do not know your ID number, call (814) 863-1293. Do not submit this application without your ID number.

FEE

AGGREGATE TECHNICIAN IN TRAINING

(To be submitted directly to and retained by your local PennDOT District Office)

N/A

AGGREGATE RECERTIFICATION CARD

\$35.00

Current Expiration Date of Aggregate Certification: _____

Applicant Name: _____

Mailing Address: _____ **City** _____

Email Address(es): *YOU MUST ENTER AT LEAST ONE EMAIL ADDRESS TO RECEIVE CONFIRMATION EMAILS.*

1. _____ 2. _____

Affiliation: PennDOT (District) _____ **Industry** ☐ **Consultant** ☐ **Other** ☐

Employer: _____ **Job Title:** _____

Daytime Phone: _____ **Alternate Phone:** _____

Supervisor Signature needed for Technician in Training: _____

PennDOT Signature needed for Technician in Training: _____

BEFORE MAILING THIS FORM, PLEASE MAKE SURE YOU HAVE COMPLETED THE FOLLOWING:

- ◆ Enclose payment. Checks and money order should be made payable to Pennsylvania State University.
- ◆ Fill in the form completely.
- ◆ Enclose the Aggregate Technician Check-Off List that you must receive from PennDOT.
- ◆ If Technician in Training was selected, make sure all signatures are obtained and submit directly to your local PennDOT District Office.

Incomplete applications will be returned!