



Mike DeWine, Governor
Jon Husted, Lt. Governor

Bruce Vanderhoff, MD, MBA, Director

Verification of Job Duties & Supervision Requirement

Section 1: This portion is to be completed by the applicant for advancement:	
Name: (First, Middle, Last)	Maiden Name:
Employment Start Date:	Employment End Date:
Complete Home Mailing Address:	
Detailed Description of Job Duties and Work Performed <i>(List full time or part-time employment. Please include the duties performed and percentage of an average day or week you spent on those activities. Attach a separate sheet if necessary.)</i>	

Applicants Signature

Date

Section 2: This portion is to be completed by the environmental health specialist in training's immediate supervisor of record. This form must be uploaded onto the portal with the EHSIT's application for advancement.
I hereby certify that the applicant has completed the activities listed above in conjunction with his/her employment. Related documents are on file and available upon request. I further certify that I, as the supervising environmental health specialist, have fulfilled my responsibilities specified in the Ohio Revised & Administrative Codes.
Name of Supervisor:(First, Middle, Last)
Complete Work Mailing Address:
Email Address and Work Phone:
Supervisors Signature & Date