



Ministry of  
Mining and  
Critical Minerals

# BC Mine Certifications Program

## Application for Shiftboss Certificate



### Section 1: Application type

New Certificate	Renewal	Equivalent	People ID No. (if unknown, leave blank):
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### Section 2: Shiftboss certificate requested (check one)

Shiftboss – Open Pit	Shiftboss – Sand and Gravel	Shiftboss - Underground
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### Section 3: Personal Information

Legal first name		Legal last name	
Middle name	Gender		Date of birth (yyyy-mm-dd)
Street address <a href="#">Verify with Canada Post</a>	City		Province Postal code
Phone number	Email address (Use personal email)		
Do you currently work at a mine or exploration site? No Yes		If yes, provide the name of the mine or exploration site	
Site phone number	Mine or exploration site email		
Are you, or do you work for, a private contractor? No Yes			
If yes, please provide:	Company name		
	Company phone #	Company email	

### Section 4: Employment experience (starting with your most recent employer, list your mining experience)

Province	Mine/exploration site name and general location	Dates employed (yyyy-mm to yyyy-mm)	Job title

<b>Section 5: Education</b> (if applicable, bring copy of mining-related diploma/degree to interview)			
Province	College/University name	Dates attended (yyyy-mm to yyyy-mm)	Diploma/degree
<b>Section 6: Other prerequisites</b> (per the Health, Safety and Reclamation Code for Mines in B.C.)			
<b>Conversant with the English language</b>		No	Yes
<b>First Aid and Transportation Endorsement certificate details</b>			
First Aid level:		Certificate No.:	
Issue date (yyyy-mm-dd):		Expiry date (yyyy-mm-dd):	
Transportation Endorsement Certificate No. (if applicable):			
Issue date (yyyy-mm-dd):		Expiry date (yyyy-mm-dd):	
<b>Section 7: Additional BC Mine Certifications</b> (if applicable)			
Type	Issue date (yyyy-mm-dd)	Expiry date (yyyy-mm-dd)	
Type	Issue date (yyyy-mm-dd)	Expiry date (yyyy-mm-dd)	
Type	Issue date (yyyy-mm-dd)	Expiry date (yyyy-mm-dd)	
<b>Section 8: Signatures</b>			
Applicant name (printed)	Applicant signature	Date signed (yyyy-mm-dd)	
Manager or Supervisor name (printed)	Manager or Supervisor signature	Date signed (yyyy-mm-dd)	

The information on this form is collected by the Ministry of Mining and Critical Minerals under Section 26(c) of the Freedom of Information and Protection of Privacy Act and will be used to process your application for a Shiftboss certification under the Health, Safety and Reclamation Code for Mines in British Columbia. If you have any questions about the collection of personal information, please contact [Mine.Certifications@gov.bc.ca](mailto:Mine.Certifications@gov.bc.ca).