



**INSTRUCTIONS**

Complete form for all personnel relevant to the laboratory's current operations. Submit hard copy with lab's application or Email scanned copy to:  
[mde.labcertification@maryland.gov](mailto:mde.labcertification@maryland.gov)

**LAB INFORMATION**

Name of Laboratory: \_\_\_\_\_

Director's Name: \_\_\_\_\_

Director's Email: \_\_\_\_\_

Name of Lab Personnel	Position Title	Years at Position	Highest Level of Education	Experience per Category in Years	
				Category	Years
				- Chemistry	
				- Microbiology	
				- Radiochemistry	
				- Chemistry	
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