

OSHA Training Institute Education Centers Program
Public Sector Safety & Health Fundamentals for General Industry
Application for Certificate Program

Read instructions before completing this form.

Instructions for Applicants

It is the responsibility of the applicant to ensure all required and elective courses have been completed prior to submitting this application for the *Public Sector Safety & Health Fundamentals for General Industry* certificate program. Submit copies of this completed and signed application and all required documentation of successful course completion for all courses by mail to *Western OSHA Education Center at ASU, PO Box 873005, Tempe, AZ 85287-3005*. Required documentation is either a course completion certificate or official continuing education transcript from the OTI Education Center where the course was completed. **Applicant must include a processing fee payment in the amount of \$95.00 payable to Arizona State University with this application form.**

Note that due to the information required you are to provide hard copies via mail at the above PO Box. In person delivery or delivery by UPS or FedEx can be sent to us at *660 South College Avenue, Tempe, AZ 85287-3005*. Fax and email submissions are not accepted. Call *480-965-2425* for additional information.

Item 1 Applicant Name

List full legal name.

Item 2 Title

List current job title. If currently not working, leave this field blank.

Item 3 Company

List current employer. If currently not working, leave this field blank.

Item 4 E-Mail

List a current email where you may be contacted.

Item 5 Applicant Address

Provide a current address, phone and fax number where you may be contacted.

Item 6 Completed Course(s)

Check the box which corresponds to the applicable OSHA course(s) completed.

OSHA Course Prerequisites

- **Must have complete the three (3) required courses:**

- OSHA #511 *Occupational Safety and Health Standards for General Industry*
- OSHA #7500 *Introduction to Safety and Health Management*
- OSHA #7505 *Introduction to Accident [Incident] Investigation*

- **Must have complete a minimum of four (4) of the following elective courses that include a minimum of 29 contact hours of training:**

- OSHA #3095 *Electrical Standards* (26 hours)
- OSHA #2264 *Permit-Required Confined Space Entry* (20 hours)
- OR**
- OSHA #7300 *Understanding OSHA's Permit-Required Confined Space Standard* (7 hours)
- OSHA #7000 *OSHA Training Guidelines for Safe Patient Handling* (7.5 hours)
- OSHA #7005 *Public Warehousing and Storage* (7 hours)
- OSHA #7100 *Introduction to Machinery and Machine Safeguarding* (4 hours)
- OR**
- OSHA #2045 *Machinery and Machine Guarding Standards* (26 hours)
- OSHA #7105 *Introduction to Evacuation and Emergency Planning* (4 hours)
- OSHA #7115 *Lockout/Tagout [Controlling Hazardous Energy to Prevent Workplace Injury]* (7.5 hours)
- OSHA #7200 *Bloodborne Pathogens Exposure Control for Healthcare Facilities* (7 hours)
- OSHA #7205 *Health Hazard Awareness* (6 hours)
- OSHA #7210 *Pandemic Influenza and Workplace Preparedness* (5.5 hours)
- OSHA #7845 *Recordkeeping Rule Seminar* (4 hours)

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Submit completed forms to:

**Western OSHA Education Center at Arizona State University
PO Box 873005
Tempe, AZ 85287-3005**

It is the responsibility of the applicant to ensure all required and elective courses have been completed prior to submitting this application. Please submit copies of this completed and signed Application for Certificate Program and all necessary documentation that verifies successful completion for each course to the authorized OTI Education Center listed above.

Requirements to complete the Certificate:

Participants must complete a minimum of seven (7) courses, comprised of required and elective courses that include a minimum of 68 contact hours of training through the OTI Education Center Program to complete the *Public Sector Safety & Health Fundamentals for General Industry* certificate program.

- Participants must have completed the three (3) required courses listed below in Item #6 for a minimum of 39 contact hours of training.
- Participants must have completed a minimum of four (4) elective courses that include a minimum of 29 contact hours of training from the list below in Item #6.

Applicant Information - Please type or print

| | | | | | |
|-----------|--|-----------|--------------------------|-------------------|--------------------------|
| 1. | Applicant Name: | | 2. | Title: | |
| 3. | Company: | | 4. | E-Mail: | |
| 5. | Applicant Address | | | | |
| | Company: | | | | |
| | Address: | | | | |
| | | | | | |
| | City: | | State: | | ZIP: |
| | Phone: | () | Fax: | () | |
| 6. | I have completed the following course(s) (Please attach a copy of your course completion certificate for each applicable course): | | | | |
| | Required Courses | | Elective Courses | | |
| | <input type="checkbox"/> | OSHA 511 | <input type="checkbox"/> | OSHA 3095 | <input type="checkbox"/> |
| | <input type="checkbox"/> | OSHA 7500 | <input type="checkbox"/> | OSHA 7300 or 2264 | <input type="checkbox"/> |
| | <input type="checkbox"/> | OSHA 7505 | <input type="checkbox"/> | OSHA 7000 | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | OSHA 7005 | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | OSHA 7100 or 2045 | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | OSHA 7105 | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | OSHA 7115 | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | OSHA 7200 | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |

7. Statement of Certification

The information I have included herein and submitted to the OTI Education Center (or its designee) is true and accurate.

Applicant Signature: _____ **Date:** _____

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THIS PAGE IS USED FOR INTERNAL PURPOSES ONLY

| OFFICE USE ONLY | | | | | | | |
|--|--|--------------------------|-----------------|-------------------------------|--|------------------|-----------------|
| Check One: | | | | Approving Authority Signature | | | |
| <input type="checkbox"/> | Approved | <input type="checkbox"/> | Not Approved | Date | | | |
| 1. | Approving Authority Name: | | | 2. | Title: | | |
| 3. | OTI Education Center: Western OSHA Education Center at ASU | | | 4. | E-Mail: | | |
| 5. Approving Authority Address | | | | | | | |
| Address: | | PO Box 873005 | | | | | |
| | | City: Tempe | | | State: AZ | | ZIP: 85287-3005 |
| Phone: | | (480) 965-2425 | | Fax: | | (480) 965-8172 | |
| If not approved, please indicate reason: | | | | | | | |
| <input type="checkbox"/> | Applicant did not complete the required courses | | | <input type="checkbox"/> | Applicant did not complete four of the elective courses | | |
| <input type="checkbox"/> | Applicant did not submit documentation of completion for all courses | | | <input type="checkbox"/> | Applicant did not complete a minimum of 29 contact hours of elective courses | | |
| <input type="checkbox"/> | Applicant did not sign form | | | <input type="checkbox"/> | Applicant did not complete the minimum 68 contact hours | | |
| <input type="checkbox"/> | Other (please explain): | | | | | | |

Process for review and approval:

- The OTI Education Center will review this form for accuracy and ensure that appropriate supporting documentation is attached.
- If this form is not approved, the OTI Education Center will notify the applicant in writing with the reason.
- If the form is approved, the OTI Education Center will send the completed form and all supporting documentation to the Directorate of Training and Education (DTE).
- Upon receipt, DTE will process the program certificate, to include the applicant's name and issue date, and will mail the program certificate to the Western OSHA Education Center. DTE will contact the OTI Education Center with any questions or concerns.
- The Western OSHA Education Center is responsible for issuing the program certificate to the student.
- Applicant must include a processing fee payment in the amount of \$95.00 payable to Arizona State University with this application form.