

Electrical Hazards for Non-Electricians

2018 Train-the-Trainer Application Form

**CHECK ONE
SESSION
ONLY**

<input type="checkbox"/> Sacramento April 4 & 5 8 am-4 pm	<input type="checkbox"/> San Bernardino April 18 & 19 8 am - 4 pm	<input type="checkbox"/> San Leandro (Bay Area) May 8 & 9 8 am - 4 pm
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TO APPLY: Complete this form and return:
By Mail to: SBCTC/OSHA Training Program
1231 I Street, Ste 302, Sacramento, CA 95814
By FAX to: 916-443-8204
On-Line: safety.sbctc.org
For more info: Call Lynn Schorno at 916-443-3302 or email: LSCHORNO@SBCTC.ORG

Applicant Information (Please Print)

First Name _____ Last Name _____

Email _____

Union _____ Local # _____ Position _____

Company _____ Position _____

Mailing Address - this is my ___ home ___ work

Street _____ Apt/Ste # _____

City _____ State _____ ZIP _____

Daytime Phone (_____) _____ This is my ___ Cell ___ Home ___ Office

I will attend as a representative of ___ Union ___ JATC ___ Contractor ___ Other (Explain Below)

Are you a member of a Health & Safety Committee? ___ Yes ___ No

How did you hear about the program? Check all that apply.

___ SBCTC Bulletin ___ JATC ___ Safety Hub Website ___ Local Union ___ Company

___ Contractor Association ___ Project Coordinator Laura Boatman ___ Other (Explain Below)

AGREEMENT: Upon completion of this Train-the-Trainer course, I agree to train at least 20 workers by September 2018. I will provide the Project Coordinator with documentation of my training.

Signed _____ Date _____

