

Registration Form

Operations Level Emergency Response
February 17, 2012

Name _____

Title _____

Institution _____

Address _____

City/State/Zip _____

Day Phone _____

Emergency Phone _____

Fax No. _____

Email _____

Specialty

Organization

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Industrial Hygiene | <input type="checkbox"/> Government |
| <input type="checkbox"/> Safety Professional | <input type="checkbox"/> Industry |
| <input type="checkbox"/> Physician | <input type="checkbox"/> Academia |
| <input type="checkbox"/> Nurse | <input type="checkbox"/> Private/Self |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |

Payment Options:

- Credit Card** Please charge my:
 Visa MasterCard AmEx

Name on Card

Mailing Address

Card Number

Expiration Date

- Check** enclosed for \$175.

Mailing address on next panel

- Purchase Order No.** _____

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Permit No. 1529

University of Utah
Rocky Mountain Center for Occupational and
Environmental Health
Department of Family & Preventative Medicine
391 Chipeta Way, Suite C
Salt Lake City, UT 84108



Operations Level Emergency Response

*February 17, 2012
Salt Lake City, UT*

Sponsored by:

Rocky Mountain Center for
Occupational and Environmental Health



As part of the Texas-Utah
Consortium for Hazardous Waste
Worker Training (TUCHWWT)

This course is offered in cooperation with
the National Institute for Environmental
Health Sciences (Grant No. U45ES019260)
in Federal Regions VI and VIII.

Operations Level Emergency Response

The 8-hour course provides participants an opportunity to learn basic skills and knowledge about protecting the health and safety of personnel, the environment, and property, when responding from a defensive posture to the accidental release of hazardous materials. Recognition and containment of hazards at the scene are presented through illustrated lectures and small group activities. This course meets the First Responder Operations Level training requirement as described in 29 CFR 1910.120(q) (HAZWOPER).

Topics to be covered:

- ❖ Regulation overview
- ❖ Spill containment methods
- ❖ Toxicology
- ❖ Chemical Awareness
- ❖ Site Control
- ❖ Incident Command System
- ❖ Personal Protective Equipment
- ❖ Decontamination

Continuing Education Units

Participants who complete this course will earn Continuing Education Units (CEUs), the national standard of recognition for non-academic professional education.

American Board of Industrial Hygiene Certification Maintenance Points have been awarded.

About The Center

The Texas-Utah Consortium for Hazardous Waste Worker Training (TUCHWWT) provides training under the Hazardous Waste Worker Training Program funded by the National Institute for Environmental Health Sciences (NIEHS). The TUCHWWT workforce is composed of personnel from the University of Texas School of Public Health Southwest Center for Occupational and Environmental Health and the University of Utah Rocky Mountain Center for Occupational and Environmental Health. The Consortium was established in 2010."

Registration

Tuition for this course is **\$175**. Tuition fees include course materials and credits.

Payment must be received within 2 weeks of registration.

Advance registration is recommended.

Online

Visit us at <http://medicine.utah.edu/rmcoeh/ContEdProg/2011courseschedule.htm>.

Telephone

Call us at 801-581-4055 with your registration information.

Fax

Fax your completed registration form to 801-585-5275.

Mail

Send your completed registration form along with a check or purchase order to:

RMCOEH
Registration Coordinator
University of Utah
391 Chipeta Way, Suite C
Salt Lake City, UT 84108

Tuition Assistance Available for Disabled Veterans and Minority Communities

Limited scholarships and subsidies are available for disabled veterans and underserved minorities. Eligible minority communities include Native Americans, Hispanics and Latinos, African Americans, Pacific Islanders and Southeast Asians.

To request tuition assistance, complete and submit the following form with your registration.

Name _____

Institution _____

No. of Employees at Institution _____

Address _____

City/State/Zip _____

Phone _____

Fax _____

Email _____

I am requesting tuition assistance because:

- I am a disabled veteran
- I am a member of the following underserved minority:
 - Native American
 - Pacific Islander
 - Hispanic/Latino
 - Southeast Asian
 - African American

For more training events, visit us at
<http://medicine.utah.edu/rmcoeh/ContEdProg/index.htm>