

OSHA 5400 - Trainer Course for the Maritime Industry
OSHA 5402 - Update for Maritime Outreach Trainers

COURSE PREREQUISITE AND EXPERIENCE REQUIREMENT ELIGIBILITY STATEMENT

Complete the form and sign. Fax form, and required documentation to (925) 560-9458 prior to the start of class. If you have any questions, please contact us at (866) 936-OSHA or by e-mail at otc@clpccd.org.

Name: _____
(please print legibly)

I have registered for the OSHA 5400 5402 class starting on _____
(circle one) (enter date - mm/dd/yyyy)

OSHA 5400 Prerequisites

I have completed all of the following prerequisites for the OSHA 5400 course (check each box):

- Two Years of Maritime Industry Safety Experience and at least ONE of the following:**
 - A. Two years of occupational safety and health experience (with a broad focus) in any industry
 - B. A degree in occupational safety and health from an accredited college or university
 - C. Certification as an Associate Safety Professional (ASP), Certified Safety Professional (CSP), or Certified Industrial Hygienist (CIH), Certified Marine Chemist (CMC), or Certified Safety and Health Manager (CSHM).
- Completion of OSHA 5410 – Maritime Industry Standards (Effective October 1, 2012)**
A copy of the card or certificate of completion will be accepted. *Please note: The OSHA 30-hr course will not be accepted as a substitute for OSHA 5410.*
- I have provided a written summary of relevant experience.**
A resume may be used as the summary.

OSHA 5402 Prerequisites

I have completed the following prerequisite for the OSHA 5402 course (check the box):

- Completion of OSHA #5400 - Trainer Course for the Maritime Industry.**
A copy of the trainer card must be provided. The expiration date must be before the end of the 90 day grace period. If the expiration date is past the three month grace period, the OSHA 5400 course must be retaken.

ACKNOWLEDGEMENT AND RELEASE

By signing below, I acknowledge that:

- 1) I have met all of the prerequisites to attend the course indicated above.
- 2) For OSHA 5400 students only, I am responsible for providing proof of completion for OSHA 5410 and a summary of experience prior to the start of class.
- 3) For OSHA 5402 students only, I am responsible for providing a copy my current trainer card prior to the start of class. I have verified that the expiration date indicated on the card is before the end of the 90 day grace period.
- 4) I understand that making false, misleading or bogus experience claims will result in the revocation of my authorized outreach trainer status and will necessitate the inclusion of my name on a list of revoked trainers.

Release Statement - Check the box that applies.

- I authorize the Chabot-Las Positas Community College District - OSHA Training Center to release my name and contact information as an authorized OSHA Construction Industry Outreach Trainer.
- I am an in-house trainer for my company's employees. Do not release my contact information.

Signature: _____ **Date:** _____

For office use only

<input type="checkbox"/> OSHA 5410 Course Certificate	Date Completed:	<input type="checkbox"/> OSHA #5400 Trainer Card	Expiration Date:	<input type="checkbox"/> Summary of Exp or Resume
OTIEC Provider:		OTIEC Provider:		