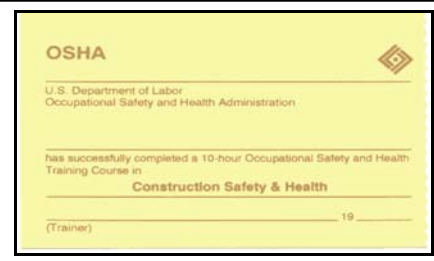
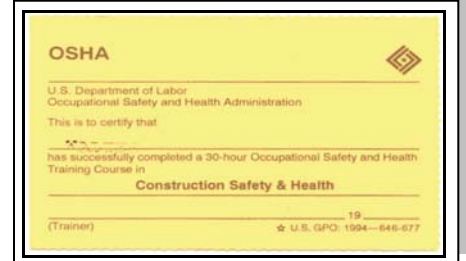




Safety Training



OSHA 10 & 30 HOUR CERTIFICATIONS



SESSION 1: February 16, 2010

Introduction to OSHA Act, General Duty Clause, Record keeping, Subpart C: General Safety and Health Provisions, Competent Person, STD 3-1.1, Clarification of Citation Policy & Personal Protective Equipment

SESSION 4: February 23, 2010

HazCom, Health Hazards, Lead, Asbestos, Silica, Flammable & Combustible Liquids & Welding & Cutting

SESSION 2: February 17, 2010

Fall Protection, Walking Working Surfaces, Stairs and Ladders, Scaffolding, Electrical, Tools-Hand & Power & Hazard Communication (Silica)
REVIEW

SESSION 5: February 24, 2010

Cranes, Rigging, Material Handling, Signs, Signals & Barricades and Powered Industrial Trucks

SESSION 3: February 18, 2010

Scaffolding, Aerial Lifts / Manlifts, Fire Protection & Prevention & Housekeeping

SESSION 6: February 25, 2010

Motor Vehicles, Confined Space, Excavation and Concrete Masonry REVIEW

FOR ADDITIONAL INFORMATION CONTACT:

PHCC Ohio Office at
800-686-PHCC (7422) or 440-543-4011
Email: ohiophcc@aol.com
Website: www.phccohio.org

PLEASE NOTE:

Sessions 1 & 2 must be completed to receive OSHA 10-Hr. card and Sessions 1 thru 6 to receive OSHA 30-Hr. card

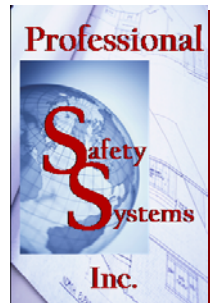
TIMES:

All sessions are 5-Hour sessions from 12:00pm - 5:00pm

LOCATION:

AKRON AREA

See reverse side for registration info



OSHA Approved Instructors provided by
Professional Safety Systems Inc.
www.safety-sys.com

OSHA 10 & 30 HOUR SAFETY TRAINING REGISTRATION

AKRON AREA

LOCATION: TBD

OSHA 10 - Feb. 16 & 17, 2010

OSHA 30 - Feb. 16, 17, 18 & 23, 24, 25, 2010

(All sessions must be attended to receive OSHA 10 or 30 certification)

FEES:	Before Feb 5	/	After Feb 5 <i>(pending availability)</i>
<input type="checkbox"/> OSHA 10	\$185.00		\$225.00
<input type="checkbox"/> OSHA 30	\$485.00		\$549.00

OCILB CEU CREDIT APPLIED FOR - OSHA 10 = 5 HOURS / OSHA 30 = 10 HOURS

Limited Space Available! Max. 30 registrants

Please print or type all information

Company _____

Address _____

City/Zip _____

Phone () _____

Fax () _____

Registrant(s)

Name _____ Email / Cell Phone _____

State ID # _____ (for CEU credit)

Name _____ Email / Cell Phone _____

State ID # _____ (for CEU credit)

Amount Remitted \$ _____ Check # _____

Make checks payable to:
And mail to:

PHCC of Ohio
18961 River's Edge Drive
Chagrin Falls, OH 44023

*Cancellation policy: Full refund if 20 day advance notice - 50% refund for 10-20 days;
sorry we cannot refund if cancellation received less than 10 days prior to seminar.
Substitutions welcome.*