

**OSHA Training Institute Education Centers
PREREQUISITE VERIFICATION FORM
CAL/OSHA Outreach Training Program**

Submit completed forms to:

UC SAN DIEGO OSHA TRAINING INSTITUTE EDUCATION CENTER

MAIL: UC San Diego OSHA Training Institute Education Center, 8950 Villa La Jolla Drive, Suite A126, La Jolla, CA 92037

FAX: 1-858-534-9257 • EMAIL: oshatraining@ucsd.edu (Subject Line: Verification of Eligibility and YOUR NAME)

It is the responsibility of the applicant to ensure all course prerequisites have been met prior to enrolling in the course. Please submit copies of this completed and signed form and all necessary documentation for prerequisite courses to the authorized OTI Education Center listed above PRIOR TO ENROLLING IN THE COURSE. Registration is not permitted without approval.

Applicant Information – Please type or print

Applicant Name:

Title:

Company:

Email:

Address:

City:

State:

Zip:

Phone No:

Alternate No:

I am applying for: OSHA 5029 OSHA 5039

Course Dates: _____

Course Location: _____

I have completed the following prerequisite courses. Please attach a copy of your trainer card or course completion certificate for each applicable course:

Construction

General Industry

OSHA 500

OSHA 501

OSHA 502

OSHA 503

OSHA 5109

OSHA 5119

OSHA 5029

OSHA 5039

Trainer No./Student No./P.I.D: _____

Trainer Card Expiration Date: _____

Applicant Signature:

Date: