

**Prerequisite Verification Form
Cal/OSHA Outreach Trainer Course**

Submit completed form to:

UC San Diego
Division of Extended Studies
OSHA Training Institute Education Center
EMAIL: oshatraining@ucsd.edu

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 PRIOR TO ENROLLING IN THE COURSE. Registration is not permitted without approval.

Applicant Information – Please type

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 for each applicable course:

Construction

OSHA 500

OSHA 502

OSHA 5109

OSHA 5029

General Industry

OSHA 501

OSHA 503

OSHA 5119

OSHA 5039

Student No: U _____

Trainer Card Expiration Date: _____

Applicant Signature:

Date: