



## Application for Asbestos Training Course Approval

A Training Provider (company) seeking SCDHEC-approval to conduct asbestos training in South Carolina in any discipline must complete Parts I-V of this application and submit all requested documentation. Any item not submitted shall constitute an incomplete application and the application will be returned without being processed.

### **PART I.** Training Provider Information:

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Mailing Address (if different from street address)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Company Contact Person & Title

\_\_\_\_\_  
Telephone Number

### **PART II.**

1. **Asbestos Training Course Discipline and Type:** Please use a separate application for each course discipline when submitting application for approval.

\_\_\_\_\_ Initial AHERA Worker

\_\_\_\_\_ Refresher AHERA Worker

\_\_\_\_\_ Initial Contractor/Supervisor

\_\_\_\_\_ Refresher Contractor/Supervisor

\_\_\_\_\_ Initial Building Inspector

\_\_\_\_\_ Refresher Building Inspector

\_\_\_\_\_ Initial Management Planner

\_\_\_\_\_ Refresher Management Planner

\_\_\_\_\_ Initial Project Designer

\_\_\_\_\_ Refresher Project Designer

\_\_\_\_\_ Initial Operation & Maintenance

\_\_\_\_\_ Refresher Operation & Maintenance

2. **Training Course Title:** \_\_\_\_\_

(As printed on the Asbestos Training Course Certificate)

3. **Purpose of the Course** \_\_\_\_\_

4. **Type of Course:**    \_\_\_ Public    \_\_\_ Contractor    \_\_\_ Internal

5. **Training Course Location:** \_\_\_\_\_

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

6. **Language of Course:** \_\_\_English \_\_\_Spanish \_\_\_Other \_\_\_\_\_

7. **Length of Course:** \_\_\_\_\_  
**Number of Days**                      **Number of Instructional Hours Per Day**

**PART III.     TRAINING PROVIDER PROFILE**

1. Complete the table below by providing all requested information for all current asbestos training courses which the Training Provider has been approved to conduct by either the EPA, or a State asbestos accreditation program, and submit a legible copy of each approval letter.

<b>Course Discipline</b>	<b>Approved by</b>	<b>Date of Approval</b>	<b>Full/Contingent</b>
Initial AHERA Worker			
Refresher AHERA Worker			
Initial Contractor/Supervisor			
Refresher Contractor/Supervisor			
Initial Building Inspector			
Refresher Building Inspector			
Initial Management Planner			
Refresher Management Planner			
Initial Project Design			
Refresher Project Design			
Initial Operation & Maintenance			
Refresher Operation & Maintenance			

2. List of other environmental areas in which the training company provides training. Attach additional sheets as necessary.

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3. Complete the table below for each instructor participating in the training course presentation. Attach additional sheets as necessary.

<b>Instructor</b>	<b>Topic or Hands-on Activity</b>	<b>Time Allotted</b>	<b>Training Method</b>	<b>Audio Visuals</b>	<b>Topic Objective</b>

4. Complete the table below to provide information about the development of the training course materials. Attach additional sheets as necessary.

<b>Course Material</b>				
<b>Developed By</b>				
<b>Date Developed</b>				
<b>Course Material Title</b>				

5. Provide name, title and telephone number of individual(s) responsible for asbestos training course compliance with state and federal asbestos regulations.

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6. Provide a description of company policy for course attendance for successful attendance.

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7. Provide a description of company policy for re-examination should an attendee fail the examination.

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8. Provide a description of company policy for re-issuing certificates should an attendee request a replacement certificate.

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**PART IV. ASBESTOS COURSE SUBMITTAL CHECK LIST**

Below is a list of course documents and materials which must be submitted as part of this asbestos course approval application. Place a mark beside each item listed that you are submitting as part of this application.

1. \_\_\_\_\_ Legible copy of Student Manual (recommend index tabs) stating course purpose, objectives, table of contents and educational asbestos text.
2. \_\_\_\_\_ Author's name, textbook title, publisher and publication year provided for any published textbook used as supplemental course material.
3. \_\_\_\_\_ Legible copy of the Instructor Manual with outline or matrix of course curriculum.
4. \_\_\_\_\_ Training Course Agenda indicating topical sessions, hands-on training, breaks, lunches, course review, examination and amount of time allotted for each.
5. \_\_\_\_\_ Description and a copy of all audio/visual materials used to enhance training.
6. \_\_\_\_\_ Description of each hands-on activity, and photographs of facility utilized for hands-on.
7. \_\_\_\_\_ Legible copy of training certificate issued to an attendee upon successful course completion.
8. \_\_\_\_\_ Legible copy of a sample examination with answers marked and a description of exam development, validation, and security.

9. \_\_\_\_\_ Submit a legible copy of each letter of approval or an instructor application for each individual participating in this asbestos training course discipline as an instructor for this company.

**PART V. CERTIFICATION OF COMPLIANCE**

I certify that the course materials submitted with this application for asbestos course approval comply with the requirements of §XIX of the South Carolina Asbestos Regulation 61-86.1, *Standards of Performance for Asbestos Projects*, and with the Environmental Protection Agency Model Accreditation Plan (40CFR 763, Subpart E, Appendix C; and all current EPA, OSHA, State or local regulations. I understand that the information contained herein and attached hereto is true and complete. I understand that submittal of falsified information and /or documentation may lead to revocation of approval.

**COMPANY CONTACT PERSON:**

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Please submit completed application and applicable fee (\$350.00 per day per discipline for an initial course and \$200.00 per year per discipline for a refresher course) to:

South Carolina Department of Health and Environmental Control  
Bureau of Air Quality  
Asbestos Section  
2600 Bull Street  
Columbia, SC 29201

**AN INCOMPLETE APPLICATION WILL BE RETURNED**