

OSHA 10/30 - 2020

Instructor: Sean Cope

Dates:

- Class #1- Feb. 11, 12, 13 (OSHA 10)
- Class #2- Apr. 14, 15, 16 (OSHA 10)
- Class #3- June 16, 17, 18 (OSHA 10/30)
June 22, 23, 24
July 7, 8, 9
- Class #4- Sept. 1, 2, 3 (OSHA 10)
- Class #5- Nov. 3, 4, 5 (OSHA 10/30)
Nov. 10, 11, 12
Nov. 16, 17, 18

OSHA 30: Learners completing OSHA 10 may complete OSHA 30 by attending the last 20 hours of the OSHA 30 course taken with the same trainer within 6 months of the OSHA 10 course.

OSHA 10/30 Hour Refresher:

Note: For Journey workers who carry a P1 or P2 plumbing license only, the first night of OSHA qualifies as a 4-Hour Refresher. You must have completed your Continuing Education class prior to taking the OSHA Refresher. You will receive an "OSHA UPGRADE" card at the end of the class. Please keep this card with your current OSHA card. This will upgrade your current OSHA 10 or 30 for another 5 years for jobs within the State of CT.

Time: All Classes are 5:00 PM to 9:00 PM

Location: Plumber & Pipefitters Local 777
450 Murdock Ave.
Meriden, CT 06450

Requirements: Journeyperson class application, below, to Local 777 JATC. Minimum of 10 people, any questions please call (203) 686-0700

UA Local 777 JATC

OSHA Outreach Student Documentation Form

This form shall be collected from OSHA 10/30 Hour Construction Outreach Students and will be kept in files with class documentation.

OUTREACH DOCUMENTATION FORM

This form to be completed by the trainee. Please print legibly, in ink and include all information.

STUDENT NAME: _____ Outreach Trainer: Sean Cope

Course Dates:

Start Date: (mm/dd/yyyy) _____

End Date: (mm/dd/yyyy) _____

Course Title (Check One)

_____ 10 Hour Construction

_____ 30 Hour Construction

_____ OSHA UPGRADE (P1/P2 Licenses Only)

Class Location:

450 Murdock Avenue - Meriden, CT 06450

EMPLOYER/Co. Name: UA Local 777 JATC

SUPERVISOR CONTACT NAME: Vinnie Valente

WORK TELEPHONE: (203) 686-0700 x101

FAX # (203) 686-0711

E-mail: vvalente@local777.org

STUDENT HOME ADDRESS

Street _____

City _____ State _____

Zip _____ Cell # _____

Email Address: _____

Outreach Student

Signature: _____

Date: (mm/dd/yyyy) _____