

2022 - OSHA 10/30

Instructor: Sean Cope

Dates:

- **Class # 1- Feb. 15, 16, 17 (OSHA 10)**
- **Class # 2- Apr. 5, 6, 7 (OSHA 10)**
- **Class # 3- June 14, 15, 16 (OSHA 10/30)**
June 20, 21, 22
June 28, 29, 30
- **Class # 4- Sept 13, 14, 15 (OSHA 10)**
- **Class # 5- Nov 1, 2, 3 (OSHA 10/30)**
Nov 8, 9, 10
Nov 15, 16, 17

Social Distancing Rules:

- **Temperature check will be taken and health questionnaire will be given.**
- **Bring your own face mask which must be worn at all times.**
- **Do not come to the training facility if you are ill, if you have been in contact with anyone diagnosed with COVID-19 in the last 14 days, or are under a quarantine order.**

OSHA 10/30 Hour Refresher:

Note: For Journey workers who carry a P1 or P2 plumbing license and have completed the last required CEU, the first night of OSHA qualifies as a 4-Hour Refresher. You will receive a separate "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: Complete and sign attached class application and return 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) _____