DEPT. OF MATURAL RESOURCES GEORGIA	Initial and Renewal Application Training Providers of Lead-Based Paint Activities Georgia Environmental Protection Division Lead-Based Paint & Asbestos Program (404) 363-7026 epd.georgia.gov							
This application is for Initial and Refresher Training courses for Lead Inspectors, Lead Risk Assessors, Lead Supervisors, Lead Project Designers, and Lead Workers. It CANNOT be used for the Renovator or Dust Sampling Technician courses. PLEASE TYPE OR PRINT IN INK.								
Training Program Application Information								
🗌 Initial 🔲 Rene	wal Original Accreditation Number	Accreditation is required annually. Renewal applications are due by September 1 yearly. After October 1, accreditation expires.						

sphoadorio ai		
fter October	1, accreditatio	n expires.

# **Training Program Information**

Training Provider Nam	e Contact Person
Mailing Address	
City	State Zip
Office Phone Number	Office Fax Number
E-Mail Address	Website Address

# **Training Course Information**

Please check the box of the course for which accreditation is requested. Submit one application for each course.							
Lead Inspector - Initial	Lead Inspector - Refresher	Lead Project Designer - Initial	Lead Project Designer - Refresher				
Lead Risk Assessor - Initial	Lead Risk Assessor - Refresher	Lead English Worker- Initial	Lead English Worker-				
Lead Supervisor - Initial	Lead Supervisor- Refresher	Lead Spanish Worker- Initial	Lead Spanish Worker -				
Is this training course accredite	d in another state?	Which state(s) have granted accred	litation?				
Attach a copy of the approval letter from each state.							

Using EPA model training materials, material approved by other authorized state, or other?

Describe course materials (General and unique features and source).	ique			
---	------	--	--	--

For Renewal, what changes have been made? Submit changes.

Has the following Georgia-specific information been included with the training course? (Yes or No)

Georgia's Rules of Lead-Based Paint Hazard Management, Chapter 391-3-24 Georgia's certification and project notification forms

Georgia-specific work practices

Enclose a copy of the following for Initial Applications:						
Course agenda	Content checklist for course					
Teacher manual	Objectives for each course topic					
Student manual(s)	Exam blueprint (number of questions from each topic, etc.)					
Course exam and answer key	Instructor and course evaluation form(s)					
Copy of the approval letter from each state	Method of assessing skills from hands-on activities					
Description of topics and procedures for condu	cting hands-on activities.					
Course hand-outs (Georgia Rules, certification	and NTP forms, other Georgia-specific information)					
Description of hands-on training (objectives and	d methods for each activity)					
Enclose a copy of all audio/visual materials (slides, Power Poin	t presentations, and video clips) used in the course.					
Training Site Information						
Please provide the street address of the permanent training facility.						

Please provide the stre	eet address of the pe	manent training	facility.		
Street Address					
City			State		Zip
How many seat in cla	ssroom?		Will you also train at	temporary sites? (Yes or	r No)
Instructor to student	ratio for Lectures		Instructor to stude	ent ratio for hands-on ac	tivities
Loca Num Inve If a temporary site w Des	ailed description of t ation(s) for the follow ber of attendees fo ntory of hands-on tr vill be used, attach t cription of the criteri	he facility, includ ving activities: le r building capaci aining materials he following: a used when sel	ling a floor diagram an cture, course testing, ł	nands-on-training, and nd	assessment activities.
		Quality C	ontrol Plan Inform	ation	
Has a quality control p	blan been developed	? Yes or No		ls it attached? Ye	es or No
Proc Proc Proc Cou Re-e Oral	edures for periodic edures for maintain edures for conduction edures for reviewin rse completion certion exam policy and pro exam procedures	revision of training ing course examing hands-on skil g principal and g ficate, include in cedures for examination	ng materials n integrity and validity a lls assessment guest instructor compe formation required in C m failure	and systematic revisior tencies 3A Rules 391-3-2404 on, and record keeping	
Supportin	g Documentatio	n f <mark>or Training</mark>	Manager, Principa	Il Instructor and Gu	lest Instructor(s)
	ng documentation for < Experience:		er, Principal Instructor, a f Reference, Documenta	nd Guest Instructors ation of Work Experience	

Education:	Copy of Diploma, Official or Unofficial Transcript
Training	Original Qualifying Training Certificate from a Georgia Accredited Training Provider

Training Manager Information
Training Manager First Name       Title         Cell Phone Number       E-mail Address
<ul> <li>Georgia Lead Rule 391-3-2404(3)(a)1. requires training managers to have at least</li> <li>1. Two years of experience, education or training in teaching adults; <u>or</u></li> <li>2. Bachelor's or graduate level degree in building construction technology, engineering, industrial hygiene, biology, physical science, safety, public health, education, business administration, program management or a related field; <u>or</u></li> <li>3. Two (2) years experience in managing a training a program specializing in environmental hazards; <u>and</u></li> <li>4. Demonstrated experience, education, or training in the construction industry including lead or asbestos abatement, painting carpentry, renovation, remodeling, occupational safety and health, or industrial hygiene.</li> <li>Use the spaces below to demonstrate the training manager's qualifications. Attach documentation to support each item.</li> <li>Minimum requirements must include completion of Section 1 and at least one section from Sections 2-4.</li> </ul>
Section 1
Do you have a minimum of two years of experience, education or training in lead or asbestos abatement, painting, carpentry, renovation, remodeling, occupational safety and health or Yes or No industrial hygiene?
Describe your technical experience.
Is supporting documentation of the Training Manager's technical experience attached? Yes or No
The Training Manager must complete at least one of the following 3 sections.         Section 2 Or         Do you have a minimum of two years of experience, education or training in teaching adults?         Yes or No         Describe your adult teaching experience.
Is supporting documentation of the Training Manager's experience in teaching adults attached? Yes or No
Section 3 Or
Do you have a bachelor or graduate degree? Yes or No Year of Completion
Area of Study for Degree What was the highest degree awarded?
Name of College or University City State
Is supporting documentation of the Training Manager's collegiate degree(s) attached? Yes or No
Section 4
Do you have a minimum of two years in managing a training program specializing in environmental Yes or No hazards? Describe the program managed. Provide the name and location of the company and the dates of management.
Is supporting documentation of the Training Manager's experience in training management attached? Yes or No

Is supporting documentation of the	e Training Manager	's experience in training	management attached?	Yes or No
------------------------------------	--------------------	---------------------------	----------------------	-----------

Principal Instructor Information Duplicated this page for additional Principal Instructors								
Principal Instructor Firs	t Name	Prin	cipal Instructor Last Name			Title		
Cell Phone Number	E-m	ail Address						
each course. The Princi	<ul> <li>Georgia Lead Hazard Management Rule 391-3-2404(3)(a)2 requires the Training Manager to appoint a qualified Principal Instructor for each course. The Principal Instructor must demonstrate <ol> <li>Experience, education or training in teaching workers workers or adults; and</li> <li>Must successfully complete a lead training course from an accredited training program specific to the discipline(s) in which the instructor intends to teach, with a minimum of sixteen (16) training hours and</li> <li>Demonstrate two (2) years demonstrated experience, education, or training in the construction industry including lead or asbestos abatement, painting, carpentry, renovation, remodeling, occupational safety and health, or industrial hygiene.</li> </ol> </li> </ul>							
Does the Principal Ins	tructor have experience, ed	ducation or t	raining in teaching adults?	Yes o	or No			
Describe the Principal I teaching experience of								
Is supporting docume	ntation of the Principal Inst	ructor's expe	erience in teaching adults a	attached? Yes	s or No			
Has the Principal Instr provider?	ructor completed at least 16	training ho	urs from a Georgia accred	ited training Yes	s or No			
What disciplines will th	ne Principal Instructor teach	ו?						
🗌 Lead S	upervisor - Initial and Refres	ner	Lead Project Designer -	Initial and Refreshe	er			
🗌 Lead Ir	nspector - Initial and Refresh	er	Lead English Worker- In	itial and Refresher				
🗌 Lead R	isk Assessor - Initial and Refr	esher	Lead Spanish Worker- Ir	nitial and Refresher	r			
List the training courses	s completed.							
Have original training	certificates been attached	o support th	nis requirement?	Yes	s or No			
	tructor have 2 years of exp carpentry, renovation, remo		-		s or No			
Describe the Principal Instructor's technical ex	xperience.							

Is supporting documentation of the Principal Instructor's technical experience attached?

Yes or No

# **Guest Instructor Information** Duplicate this page for additional guest instructors.

Guest Instructor Firs	t Name			Guest In	structor Last Name			Title	
Cell Phone Number			E-mail Addr	ess					
and/or work practice 1. 2. 3.	s for each o Demonstra Must succe which th Demonstra	course. The c te experienc essfully comp ne instructor i te two (2) ye	Guest Instructo e, education or lete a lead train intends to teach ars of experience	r must training i ning cours n, with a r ce, educa	r to appoint qualified G n teaching workers or se from a accredited tra ninimum sixteen (16) to ation or training in the f ations and attach docum	adults; <b>and</b> aining program raining hours <b>a</b> ield in which th	n specific to the <b>and</b> ney will provide	discipline the instrue	e(s) in
Does the Guest Ins	tructor hav	e experienc	e, education o	r training	in teaching adults?		Yes or No		
Describe the Guest la teaching experience									
Is supporting docur	nentation c	of the Guest	Instructor's ex	perience	in teaching adults att	ached?	Yes or No		
Has the Guest Instr provider?	uctor com	pleted at lea	st 16 training h	nours fror	m a Georgia accredite	ed training	Yes or No		
What disciplines ha			•	-					
	Lead S	Supervisor - Ir	nitial and Refre	sher	Lead Project Des	signer - Initial a	Ind Refresher		
	🗌 Lead li	nspector - Ini	tial and Refresh	ner	Lead Spanish Wo	orker- Initial an	d Refresher		
	🗌 Lead F	Risk Assessor	- Initial and Ref	resher	🔲 Lead English Wo	orker- Initial and	d Refresher		
List other Guest Instructor training.									
Have original trainir	ng certifica	tes been att	ached to supp	ort this tra	aining requirement?		Yes or No		
					or training in lead or a onal safety and health		Yes or No		
Describe the Guest litechnical experienc									

Is supporting documentation of the Guest Instructor's technical experience attached?

Yes or No

## **Accreditation Fees**

Please enclose applicable fees as determined by this Schedule in the form of a check or money order. Accreditation Fees must accompany this application. Do not send cash. Renewal applications must be submitted yearly and are due by September 1. Renewal applications received by September 1 are subject to regular renewal fees. Please pay the past due renewal fee for renewal applications submitted after September 1. Accreditation expires if application and applicable fees are not received by October 1.

Cours	a Each Course Name se ring For	Number Training Hours per Course	Initial Accreditation Fee (\$400 Per 8 Training Hours)	Regular Renewal Fee per Course	Past Due Renewal Fee	Accreditation Fee Submitted	
	LeacInspector - Initial	24 Training Hours	\$1,200.00	\$300.00	\$450.00		
	Lead Inspector - Refresher	8 Training Hours	\$400.00	\$300.00	\$450.00		
	Lead Supervisor - Initial	32 Training Hours	\$1,600.00	\$300.00	\$450.00		
	Lead Supervisor - Refresher	8 Training Hours	\$400.00	\$300.00	\$450.00		
	Lead Risk Assessor - Initial	16 Training Hours	\$800.00	\$300.00	\$450.00		
	Lead Risk Assessor - Refresher	8 Training Hours	\$400.00	\$300.00	\$450.00		
	Lead Project Designer - Initial	8 Training Hours	\$400.00	\$300.00	\$450.00		
	Lead Project Designer - Refresh	ner 4 Training Hours	\$400.00	\$300.00	\$450.00		
	Lead English Worker - Initial	16 Training Hours	\$800.00	\$300.00	\$450.00		
	Lead English Worker - Refreshe	er 8 Training Hours	\$400.00	\$300.00	\$450.00		
	Lead Spanish Worker - Initial	16 Training Hours	\$800.00	\$300.00	\$450.00		
	Lead Spanish Worker - Refresh	er 8 Training Hours	\$400.00	\$300.00	\$450.00		
Date of Check Check Amount (Total All Accreditation Fees							
Name	on Check			Chec	k Number		

#### THE TRAINING MANAGER COMPLETING THIS VERIFICATION AND CERTIFICATION OF COMPLIANCE STATEMENTS MUST SIGN BELOW AFTER PRINTING. WE MUST HAVE AN ORIGINAL SIGNATURE ON THIS DOCUMENT IN ORDER TO COMPLETE APPLICATION PROCESSING.

By signing below, I hereby certify under penalty of law that I have personally examined and evaluated for compliance and authenticity all information and attached documents submitted as part of this application in its entirety. Falsifying or knowing omission of any material required as part of this application is grounds for application refusal and/or accreditation suspension or revocation. All submitted information is true, accurate, and complete.

I certify under penalty of law that this training program meets or exceeds and at all times shall comply with the minimum requirements established in Georgia Rules 391-3-24-.04. I will be responsible for maintaining the validity and integrity of the hands-on skills assessment to ensure that it accurately evaluates the trainee's performance of the work practices and procedures associated with each course topic. I will be responsible for maintaining the integrity and validity of the course exam to ensure that it accurately evaluates the trainee's knowledge and retention of the course topics. I will ensure that the instructors accurately teach the training course curriculum as accepted by EPD. I have developed and will implement and maintain a Quality Control Program for this course.

### PLEASE PRINT AND TRAINING MANAGER SHALL SIGN THE APPLICATION HERE:

	Date Signed.	
Print Name and Title of Training Manager:		

Γ

Data Cignadu

A completed application shall consist of all parts of this application. If any required item is not submitted the application will be considered incomplete and it will be returned without being processed. Submit one application per course. Attach additional pages for multiple guest instructors. The application must be signed by the Training Manager.

## How to Submit This Application

Click on the Print Form Button on the right to print the application. You will need to print at least two copies. Send one copy of the signed application and a check or money order for the accreditation fee to

## EPD LEAD ABATEMENT FEES POST OFFICE BOX 101896 ATLANTA, GA 30392

Send the other signed copy of the application and all supporting documentation to

### EPD LEAD-BASED PAINT PROGRAM ATTN: TRAINING PROVIDER ACCREDITATIONS 4244 INTERNATIONAL PARKWAY, SUITE 104 ATLANTA, GA 30354

The last step is to e-mail the application to EPD to expedite the application process. You must still mail all materials explained above. The e-mail address is asbestos.leadprogram@dnr.state.ga.us.

Filled out all applicable sections of the application Signed and dated the application Made a copy of your application for your files

Enclosed a description of facilities and equipment for lectures, course exams, and hands-on activities Enclosed the end-of-course exam and answer key for the course exam

Enclosed course exam blueprint

Enclosed a description of procedures for each hands-on activity and skills assessment for each activity

Enclosed quality control plan(s)

Enclosed course teacher and student manual(s)

Course agenda(s)

Content Checklist for each manual

Objectives for each course topic

Enclosed copy of all audio/visual materials (slides, Power Point presentations, and video clips) used in the course Enclosed an original course completion sample certificate (Do not use social security numbers) Enclosed Georgia Lead -Based Paint Hazard Management Rules and Georgia applications for certifications

Enclosed education, experience, and other documentation for the Training Program Manager

Enclosed education, experience, and other documentation for the Principal Instructor

Enclosed education, experience, and other documentation for the Guest Instructor(s)

- Copy of official academic transcript or diploma as evidence of meeting the education requirements as needed for training manager/instructor(s)
- Resumes, letters of reference, or other documentation of work experience as evidence of meeting the work experience requirements as needed for training manager and instructor(s). This documentation should including, but not limited to, work history documenting related experience including inclusive dates of experience, employer's name, address and phone number, positions held, projects completed and jobs held during the projects.
- Copies of certificates from "Train-the-Trainer" courses or lead-specific training courses as evidence of training requirements.

Enclose the appropriate accreditation fee(s). Send a check or money order as directed above; do not send cash.

The Training Manager must sign and date the application. Applications are not complete and will not be processed if the application is not signed.

For additional information, please contact the Lead-Based Paint and Asbestos Program at (404) 363-7026.