

# EHS APPROVED CONTINUING EDUCATION COURSES 2011

<b>COURSE TITLE:</b> Soil Carbon and You: Its Complicated			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> 2/24-25/2011		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> McMinnville, OR & Willamette Valley Field Trip			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b>		<b>WEBSITE ADDRESS:</b>	
<b>CONTACT NAME:</b> Cory Owens		<b>EMAIL:</b>	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b>	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-01</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>APPROVED GENERAL HOURS:</b> 14	<b>APPROVED ETHICS HOURS:</b>	<b>MAXIMUM APPROVED HOURS:</b> 14
<b>MULTI DAY/AGENDA COURSE:</b> <input checked="" type="checkbox"/> YES (verify course approval documentation at audit)			

<b>COURSE TITLE:</b> FEMA IS-241 Decision Making and Problem Solving			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> January 7, 2011		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> Emergency Management Institute			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b>		<b>WEBSITE ADDRESS:</b>	
<b>CONTACT NAME:</b> Lawrence M Brown		<b>EMAIL:</b>	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b>	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-02</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>APPROVED GENERAL HOURS:</b> 8	<b>APPROVED ETHICS HOURS:</b>	<b>MAXIMUM APPROVED HOURS:</b> 8
<b>MULTI DAY/AGENDA COURSE:</b> <input type="checkbox"/> YES (verify course approval documentation at audit)			

# EHS APPROVED CONTINUING EDUCATION COURSES 2011

<b>COURSE TITLE:</b> Recreational Facilities Conference			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> March 16-17, 2011		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> Portland State Office Building			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b>		<b>WEBSITE ADDRESS:</b>	
<b>CONTACT NAME:</b> Stephen Keifer		<b>EMAIL:</b>	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b>	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-03</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>APPROVED GENERAL HOURS:</b> 12	<b>APPROVED ETHICS HOURS:</b>
		<b>MAXIMUM APPROVED HOURS:</b> 12	
<b>MULTI DAY/AGENDA COURSE:</b> <input checked="" type="checkbox"/> YES (verify course approval documentation at audit)			

<b>COURSE TITLE:</b> Ready fo Change			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/>		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> Oregon			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b>		<b>WEBSITE ADDRESS:</b>	
<b>CONTACT NAME:</b> Stacy Vynne		<b>EMAIL:</b>	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b>	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-04</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>APPROVED GENERAL HOURS:</b> 6.5	<b>APPROVED ETHICS HOURS:</b>
		<b>MAXIMUM APPROVED HOURS:</b> 6.5	
<b>MULTI DAY/AGENDA COURSE:</b> <input checked="" type="checkbox"/> YES (verify course approval documentation at audit)			

# EHS APPROVED CONTINUING EDUCATION COURSES 2011

<b>COURSE TITLE:</b> EHS Staff Meeting			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> February 3, 2011		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> Oregon			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b>		<b>WEBSITE ADDRESS:</b>	
<b>CONTACT NAME:</b> Christie Sweitz		<b>EMAIL:</b>	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b>	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-05</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>APPROVED GENERAL HOURS:</b> 3.25	<b>APPROVED ETHICS HOURS:</b>	<b>MAXIMUM APPROVED HOURS:</b> 3.25
<b>MULTI DAY/AGENDA COURSE:</b> <input type="checkbox"/> YES (verify course approval documentation at audit)			

<b>COURSE TITLE:</b> 17th Annual Onsite Wastewater Conference			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> March 11, 2011		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> Oregon			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b>		<b>WEBSITE ADDRESS:</b>	
<b>CONTACT NAME:</b> Belinda Rasmussen		<b>EMAIL:</b>	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b>	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-06</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>APPROVED GENERAL HOURS:</b> 12	<b>APPROVED ETHICS HOURS:</b>	<b>MAXIMUM APPROVED HOURS:</b> 12
<b>MULTI DAY/AGENDA COURSE:</b> <input type="checkbox"/> YES (verify course approval documentation at audit)			

# EHS APPROVED CONTINUING EDUCATION COURSES 2011

<b>COURSE TITLE:</b> Harmful Algae Bloom Surveillance Task Force Meeting			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> March 31, 2011		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> Portland State Office Building			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input checked="" type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b> Oregon Public Health Division		<b>WEBSITE ADDRESS:</b>	
<b>CONTACT NAME:</b> Bonnie Widerburg		<b>EMAIL:</b> bonnie.l.widerburg@state.or.us	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b> 971-673-0976	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER:</b> 2011-07			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>APPROVED GENERAL HOURS:</b> 5.50	<b>APPROVED ETHICS HOURS:</b>
		<b>MAXIMUM APPROVED HOURS:</b> 5.50	
<b>MULTI DAY/AGENDA COURSE:</b> <input type="checkbox"/> YES (verify course approval documentation at audit)			

<b>COURSE TITLE:</b> 2011 DEQ Onsite Wastewater Program Soil Workshops			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/> May 10 <sup>th</sup> & 11 <sup>th</sup> & May 17 <sup>th</sup> & 18 <sup>th</sup> , 2011		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> McMinnville OR & Bend OR			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input checked="" type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b> Oregon DEQ		<b>WEBSITE ADDRESS:</b>	
<b>CONTACT NAME:</b> Robert Baggett		<b>EMAIL:</b> Baggett.robert@deq.state.or.us	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b>	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER:</b> 2011-08			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>APPROVED GENERAL HOURS:</b> 26	<b>APPROVED ETHICS HOURS:</b>
		<b>MAXIMUM APPROVED HOURS:</b> 26	
<b>MULTI DAY/AGENDA COURSE:</b> <input checked="" type="checkbox"/> YES (verify course approval documentation at audit)			

# EHS APPROVED CONTINUING EDUCATION COURSES 2011

<b>COURSE TITLE:</b> Conducting Acidified Food Inspections Course			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> November 16-19, 2010		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/>			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b>		<b>WEBSITE ADDRESS:</b>	
<b>CONTACT NAME:</b> Susan Kendrick		<b>EMAIL:</b> susan.e.kendrick	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b>	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-09</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>APPROVED GENERAL HOURS:</b> 25	<b>APPROVED ETHICS HOURS:</b>	<b>MAXIMUM APPROVED HOURS:</b> 25
<b>MULTI DAY/AGENDA COURSE:</b> <input checked="" type="checkbox"/> YES (verify course approval documentation at audit)			

<b>COURSE TITLE:</b> USDA, FSIS Food Safety Program, Darren Sisk presenter			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> April 7, 2011		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> 11:15 am - 12:45 pm	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> Multnomah County South East HHealth Clinic 3653 SE 34th Ave			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input checked="" type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b> Mult. Co Environmental Health		<b>WEBSITE ADDRESS:</b> www.mchealthinspect.org	
<b>CONTACT NAME:</b> Christie Sweitz REHS		<b>EMAIL:</b> christie.a.sweitz@multco.us	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b> 503-988-3400	<b>FAX:</b> 503-988-5844
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-10</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>APPROVED GENERAL HOURS:</b> 1.5	<b>APPROVED ETHICS HOURS:</b>	<b>MAXIMUM APPROVED HOURS:</b> 1.5
<b>MULTI DAY/AGENDA COURSE:</b> <input type="checkbox"/> YES (verify course approval documentation at audit)			

# EHS APPROVED CONTINUING EDUCATION COURSES 2011

<b>COURSE TITLE:</b> Multiple ITRC Courses			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/> Jan 13, 2011 through Dec 15, 2011		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/> Online			
<b>IS COURSE REPEATED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b> Varies by month	<b>END DATE:</b> 12/15/2011
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input checked="" type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b> DEQ/EPA/ITRC		<b>WEBSITE ADDRESS:</b> www.itrcweb.org	
<b>CONTACT NAME:</b> Jean Balent		<b>EMAIL:</b> balent.jean@epamail.epa.gov	
<b>ADDRESS(OPTIONAL):</b> WA/DC		<b>PHONE:</b> 703-603-9924	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-11</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>APPROVED GENERAL HOURS:</b> 2.25per course	<b>APPROVED ETHICS HOURS:</b>
		<b>MAXIMUM APPROVED HOURS: 2.25per course</b>	
<b>MULTI DAY/AGENDA COURSE:</b> <input checked="" type="checkbox"/> YES (verify course approval documentation at audit)			

<b>COURSE TITLE:</b> Inclusive Just-in-Time Trng for Emerg Response Operations			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> 03/30/11		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> 8:30am - 12:00pm	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input type="checkbox"/> Lincoln Building, Portland, OR 97204			
<b>IS COURSE REPEATED?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<b>IF YES; HOW OFTEN?</b>	<b>END DATE:</b>
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input checked="" type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> OTHER:			
<b>SPONSOR/PROVIDER:</b> NACCHO / Mult Co. Advanced Practice Center		<b>WEBSITE ADDRESS:</b> http://web.multco.us/health/advanc	
<b>CONTACT NAME:</b> Jon Kawaguchi		<b>EMAIL:</b> jon.k.kawaguchi@multco.us	
<b>ADDRESS(OPTIONAL):</b>		<b>PHONE:</b> 503.988.3400	<b>FAX:</b> 503.988.5844
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-12</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>APPROVED GENERAL HOURS:</b> 3.50	<b>APPROVED ETHICS HOURS:</b>
		<b>MAXIMUM APPROVED HOURS: 3.50</b>	
<b>MULTI DAY/AGENDA COURSE:</b> <input type="checkbox"/> YES (verify course approval documentation at audit)			

# EHS APPROVED CONTINUING EDUCATION COURSES 2011

<b>COURSE TITLE:</b> Oregon Health Authority (OHA): Re-certification of Standards			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/> 2011 Winter/Spring/Summer/Fall		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/> Local Restaurants			
<b>IS COURSE REPEATED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>IF YES; HOW OFTEN?</b> Winter/Spring/Summer/Fall	<b>END DATE:</b>	
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input checked="" type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input checked="" type="checkbox"/> OTHER: Field Work			
<b>SPONSOR/PROVIDER:</b> Oregon Health Authority (OHA)		<b>WEBSITE ADDRESS:</b> www.healthoregon.org/foodsafety	
<b>CONTACT NAME:</b> Valerie Aliski		<b>EMAIL:</b> valerie.aliski@state.or.us	
<b>ADDRESS(OPTIONAL):</b> 800 NE Oregon Street Ste. 640 Portland, OR 97232		<b>PHONE:</b> 971-673-0445	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-13</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>APPROVED GENERAL HOURS:</b> 16.0	<b>APPROVED ETHICS HOURS:</b>	<b>MAXIMUM APPROVED HOURS:</b> 16.0
<b>MULTI DAY/AGENDA COURSE:</b> <input checked="" type="checkbox"/> YES (verify course approval documentation at audit)			

<b>COURSE TITLE:</b> OHA Standardization Field Training and Certification - Initial Certification of Standards			
<b>COURSE DATE(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/> 2011 Winter/Spring/Summer/Fall		<b>TIME(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/>	
<b>COURSE LOCATION(S); OR INDICATE VARIOUS HERE:</b> <input checked="" type="checkbox"/> Local Restaurants			
<b>IS COURSE REPEATED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>IF YES; HOW OFTEN?</b> Winter/Spring/Summer/Fall	<b>END DATE:</b>	
<b>CONTINUING EDUCATION METHOD:</b> <input type="checkbox"/> MEETING <input type="checkbox"/> CLASSROOM <input checked="" type="checkbox"/> WORKSHOP <input type="checkbox"/> SEMINAR <input type="checkbox"/> ONLINE <input type="checkbox"/> CORRESPONDENCE <input checked="" type="checkbox"/> OTHER: Field Work			
<b>SPONSOR/PROVIDER:</b> Oregon Health Authority (OHA)		<b>WEBSITE ADDRESS:</b> www.healthoregon.org/foodsafety	
<b>CONTACT NAME:</b> Valerie Aliski		<b>EMAIL:</b> valerie.aliski@state.or.us	
<b>ADDRESS(OPTIONAL):</b> 800 NE Oregon Street Ste. 640 Portland, 97232		<b>PHONE:</b> 971-673-0445	<b>FAX:</b>
<b>OFFICE USE ONLY</b>			
<b>AGENCY APPROVAL NUMBER: 2011-14</b>			
<b>COURSE APPROVED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>APPROVED GENERAL HOURS:</b> 24.0	<b>APPROVED ETHICS HOURS:</b>	<b>MAXIMUM APPROVED HOURS:</b> 24.0
<b>MULTI DAY/AGENDA COURSE:</b> <input checked="" type="checkbox"/> YES (verify course approval documentation at audit)			