

SPECIALTY AREAS	TRAINING COMPLETED	DATE
Chapter 12 – Tank Car Specialty		
Chapter 13 – Cargo Tank Specialty		
Chapter 14 – Intermodal Tank Specialty		
Chapter 15 – Marine Tank Vessel Specialty		

- **Pre-Requisite: Is Applicant certified as a Hazardous Materials Technician?** Yes No

HAZARDOUS MATERIALS SAFETY OFFICER	TRAINING COMPLETED	DATE
11.1 General		
11.2 Analyzing the Incident		
11.3 Planning the Response		
11.4 Implementing the Planned Response		
11.5 Evaluating Progress		

- **Pre-Requisite: Is applicant certified as a Hazardous Materials Technician?** Yes No
- **Has applicant completed the Hazardous Materials Safety Officer Task Book?** Yes No
- OR-
- **Has applicant completed the Hazardous Materials Safety Officer Evaluation Task Sheets?** Yes No

ATTEST: As an authorized signer I have reviewed this form for completeness and accuracy. I understand that falsification of this document makes my certifications subject to denial or revocation under ORS 181A.640 and OAR 259-009-0070.

AS THE APPLICANT: I am aware that a criminal history check will be conducted with submission of this application for certification. I understand that if I have been convicted of a crime(s) I may be subject to denial or revocation of my application or certification(s): Yes No

Signature of Applicant

Date

Signature of Agency Head or Designee

Printed name of Agency Head or Designee

Date