## Lead-Based Paint Activities and Renovation Pre-Training Notification



**Important:** Training providers must submit the Pre-Training Notification to the Oregon Health Authority (OHA) at least seven (7) business days prior to the start date of the course. ☐ Original Updated 1. Notification type (choose one): Cancellation If this is an update or cancellation, please show original date(s): 2. Training program information: Name: \_\_\_\_\_ Accreditation number: \_\_\_\_ (example: 41R050) Address: City State ZIP code Street Phone number: Email: 3. Course information (information in this section will be posted on the OHA website): Discipline: Dust sampling technician Inspector Project designer Supervisor Risk assessor Renovator Worker Initial Refresher Type: Training dates: Date(s) (month/day/year) Start time (H:MM) End time (H:MM) am / am / pm pm am / l pm am / pm am / am / l pm pm am / | am / pm pm am / | pm am / l pm (attach additional sheets, if needed). Principal instructor (name): \_\_\_\_\_ Phone: \_\_\_\_ Guest instructor(s) (if any): Training location name (if applicable): Training location address: Citv Street State ZIP code

Send completed form to: Oregon Health Authority

Training manager (print)

800 NE Oregon Street, Suite 640

Portland OR 97232 Fax: 971-673-0457

Email: <a href="mailto:leadprogram@odhsoha.oregon.gov">leadprogram@odhsoha.oregon.gov</a>

Training manager signature

Date