



POST-TRAINING NOTIFICATION

Important: The training program manager may complete this sample form or a similar form when notifying EPA. Consult the *Instructions for Notifying EPA of Lead-Based Paint Abatement Activities Courses* when preparing post-training notification. **Please type or print responses in black or blue ink only.**

A. Type of Notification (Please indicate the type of notification)

- Original
- Updated

B. Training Program

Name: _____ Accreditation Number: _____

Address: _____
Street Address City State Zip Code

Phone Number: _____

C. Course Information

Discipline: Worker Supervisor Inspector Risk Assessor Project Designer

Type: Initial Refresher

Training Dates: from _____ to _____
Month/Day/Year Month/Day/Year

Training Location Address: _____
Street Address City State Zip Code

D. Student Information (Attach additional paper if necessary)

Name	Address	Date of Birth	Course Certificate #	Course Test Score

E. Training Managers Information Please note that this form is incomplete without a signature.

I hereby attest and affirm that the information included on this notification form is true and accurate to the best of my belief and knowledge. I acknowledge that any approval authorized pursuant to this notification will be subject to revocation if issuance was based on incorrect or inadequate information that materially affected the decision to issue the approval.

Name: _____ Signature: _____ Date Signed: _____