

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:					
Phone Number:	Street Address	_	City	State Zip Code	
C. Course Information	1				
Discipline:	I ☐ Refresher to	-		☐ Project Designer	
Training Location Add	Street Address				
D. Student Information	 on (Attach additional pap	City per if necessary)		State	Zip Code
Name	Address		Date of Birth	Course Certificate#	Course Test Score
E. Training Managers	Information Please	note that this forr	m is incomplete w	vithout a signature.	-
belief and knowledge	. I acknowledge that	any approval a	authorized pursu	n is true and accurate ant to this notification t materially affected the	will be subject to
Name:	Signatur	re:	Date S	Signed:	-