

OUTREACH TRAINING PROGRAM REPORT

General Industry

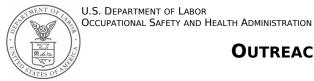
1. Trainer Nam	ie		2. Trainer ID Number	3. N Cou	1ost Recent Train rse	er 4. E Date	xpiratio e
5. Authorizing	Training Org	ganization					
6. Trainer Add Company Address	ress						
Phone No.	City		Em	State	ZI	p	
7. Course Conducted		urse Empha anish	asis (check all th	at apply) anguage oth	er than English or S	Spanish	9. Numl of Stude
30-Hour	Otł	uth (age 18 d ner (specify):			e or Partnership (sp	ecify):	
10. Training Street	Site Address	5	City		State	Country	
Address					State	Country	
Workplace (specify):	Fraining Site		Hotel 🗌 Union	Employer	Association 🗌 OI	ther	
	Ouration End Time:	Start Time:	End Time:	Start Time:	End Time:	Start Time:	End Time
Course Date:		Course D	Date:	Course D	ate:	Course I	Date:
13. Sponsoring Safety & H	lealth 🗌 Ei	n mployer ommunity	Labor/Unio		mployer Associatio	'n	

14. Statement of Certification

I attest that I have conducted this Outreach Training Program class in accordance with the OSHA Outreach Training Program Requirements and Procedures. I have maintained the training records as stated in the Requirements and I will provide these records to the OSHA Office of Training and Education (OTE) (or its designee) upon request. I understand that I will be subject to immediate dismissal from the OSHA Outreach Training Program if information provided herein is not true and correct. I further understand that providing false information herein may subject me to civil and criminal penalties under Federal law, including 18 U.S.C. 1001 and section 17(g) of the Occupational Safety and Health Act, which provides criminal penalties for making false statements or representations in any document filed pursuant to that Act. I hereby attest that all provided is true and correct.

Privacy Act Statement: The Privacy Act of 1974 as amended (5 U.S.C. 552a), section 901 of Title 30 to the US Code and 20 CFR 725.504 - 513 authorize collection of this information. The purpose of this information is to determine whether the trainer is authorized and whether the training was properly completed. Completion of the information on the form is required to obtain the OSHA student course completion cards. Additional disclosures of this information are not required. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number.

Paperwork Reduction Act Statement: Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to obtain OSHA student course completion cards as stated in OSHA's *Outreach Training Program Requirements* and Industry-Specific *Procedures*. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Occupational Safety and Health Administration, Directorate of Standards and Guidance, 200 Constitution Avenue, NW, Room N3718, Washington, DC 20210 and reference the OMB Control Number 1218-0262. Note: Please do not return the completed OSHA Form 4-50.1 to this address.



OUTREACH TRAINING PROGRAM REPORT General Industry Read the instructions before completing this form. Dat

e:

] If submitting this form by electronic means, by checking the box to the left or affixing signature, I attest that all information provided in this submission is true and accurate.

15. Topic Outline

Trainer Signature:

	10-Hour Topics
*Indicate I class.	the amount of time spent on each topic in th
11	REQUIRED
Hours *	
	Introduction to OSHA
	Walking and Working Surfaces
	Exit Routes, Emergency Action Plans, Fire Prevention Plans, and Fire Protection
	Electrical
	Personal Protective Equipment
	Hazard Communication
	<u>ELECTIVE</u>
Hours *	
	Hazardous Materials
	Permit-Required Confined Spaces
	Lockout/Tagout
	Machine Guarding
	Welding, Cutting, and Brazing
	Introduction to Industrial Hygiene
	Bloodborne Pathogens
	Ergonomics
<u> </u>	Fall Protection
	Safety and Health Programs
	Powered Industrial Vehicles
	Materials Handling
	Optional
Hours *	Optional
nours	
	TOTAL HOURS

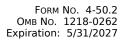
where the state of the state	30-Hour Topics
*Indicate the	amount of time spent on each topic in the class. REQUIRED
Hours *	<u>ILL QUILLD</u>
	Introduction to OSHA
	Managing Safety and Health
	Walking and Working Surfaces, including Fall
	Protection
	Exit Routes, Emergency Action Plans, Fire Prevention Plans, and Fire Protection
	Personal Protective Equipment
	Electrical
	Hazard Communication
	Materials Handling
	ELECTIVE
Hours *	
	Hazardous Materials
	Permit-Required Confined Spaces
	Lockout/Tagout
	Machine Guarding
	Welding, Cutting, and Brazing
	Introduction to Industrial Hygiene
	Bloodborne Pathogens
	Ergonomics
	Fall Protection
	Safety and Health Programs
	Powered Industrial Vehicles
	OPTIONAL
Hours *	
	_
	_
	_
	-
	TOTAL HOURS



Form No. 4-50.2 Омв No. 1218-0262 Expiration: 5/31/2027

OUTREACH TRAINING PROGRAM REPORT

General Industry Read the instructions before completing this form.



OUTREACH TRAINING PROGRAM REPORT

General Industry Read the instructions before completing this form.

16. Student Names	
(Names must be legible)	
1.	21.
2.	22.
3.	23.
4.	24.
5.	25.
6.	26.
7.	27.
8.	28.
9.	29.
10.	30.
11.	31.
12.	32.
13.	33.
14.	34.
15.	35.
16.	36.
17.	37.
18.	38.
19.	39.
20.	40.

Instructions for Outreach Training Program Trainer



OUTREACH TRAINING PROGRAM REPORT

General Industry Read the instructions before completing this form.

The Occupational Safety and Health Administration (OSHA) Outreach Training Program is a voluntary orientation training program aimed at workers. It provides workers with information about OSHA and an overview of job hazards. Trainers authorized through the OSHA Outreach Training Program must conduct Outreach Training Program classes in accordance with the current Outreach Training Program Requirements and Industry-Specific Procedures issued by the Office of Training and Education (OTE). The Outreach Training Program Requirements and Industry-Specific Procedures can be found online at the OSHA.gov website under Training, OSHA Outreach Training Program.

	Trainer Name						
Item 1	List the trainer's full name. When completing student course completion cards, print or type the trainer's name						
	on each card. Names must be legible.						
	ID Number						
ltem 2	This applies only to trainers who have already received student cards. New trainers do not have an ID number.						
	ID numbers are issued to trainers after their initial course is documented. If this is the trainers first class, or if						
	the trainer has an updated trainer status, include a cop of the trainer card.						
	Most Recent Trainer Course						
Item 3	Indicate the most recent applicable course number you have completed.						
Item 4	Expiration Date						
	Enter the trainer authorization expiration date listed on the bottom right OSHA-authorized trainer card.						
	Authorizing Training Organization (ATO)						
Item 5	The trainer's ATO is the OTI Education Center that conducted the trainer's most recent trainer or update						
	course.						
Item 6	Trainer Address						
Item 6	Provide an address of where to send the student cards. The cards must be sent directly to the trainer.						
Item 7	Course Conducted						
item /	Place an "x" in the appropriate box. A separate report must be completed for each course completed.						
	Course Emphasis (check all that apply)						
Item 8	Place an "x" net to all the information that applies to the majority of this course. If the course included special-						
item o	emphasis such as (CalOSHA, ET&D, etc) place an "x" next to Other and denote the specific type on the line						
	below.						
Item 9	Number of Students						
	Indicate the number of students who completed the course.						
Item	Training Site Address						
10	Provide the address, city, state, and country where the course was conducted.						
Item	Type of Training Site						
11	Place an "x" next to the type of site where the training was held. If none of the choices apply, specify the type						
	of training site.						
Item	Course Duration						
12	Enter the date, start time, and end time of each day the course was held. Trainers						
Item	Sponsoring Organization						
13	Place an "x" in the box to indicate the sponsor of the training. If the category is not listed check other and						
	specify.						
	Statement of Certification						
Item	The trainer must sign the Statement of Certification to attest to the accuracy of the document and that the						
14	class was conducted in accordance with OSHA Outreach Training Program Requirements and Procedures. If						
	requesting cards electronically, the trainer must place an "x" in the box or affix a signature.						
Item	<u>Topic Outline</u>						
15	Complete the applicable 10- or 30-hour topic outline. The trainer <u>must</u> complete this part of the form.						
Item	Student Names						
16	List the first and last name of each student that completed the entire course. Ensure the names are legible and						
	spelled correctly.						