

ASBESTOS TRAINING COURSE NOTIFICATION

****PLEASE TYPE OR PRINT IN INK****

Training Provider Name

Contact Name/Title

Address

Telephone Number

☐ **Cancellation**

City **State** **Zip**

Course Title	Date(s) of Course		Course Location*		State	Times		Language	ALL Instructors**
	Start	Finish	Street Address	City		Start	Finish		

Notes:

* Course Location- If location is different from principal location, please attach vicinity map showing the exact location of training facility.

** All Instructors- Identify the principal instructor and all other instructors used for each course.

Notifications, cancellations and changes must be submitted per the North Carolina Asbestos Hazard Management Program Rules (AHMP Rules; 10A NCAC 41C .0603).

Health Hazards Control Unit
Dept of Health and Human Services
1912 Mail Service Center
Raleigh, NC 27699-1912
phone: 919-707-5950; fax: 919-870-4808

Signature of Course Director

Date