



TRAINING COURSE PROVIDER ACCREDITATION APPLICATION

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
 HEALTHY HOMES AND LEAD HAZARD PREVENTION PROGRAM
 1000 SW JACKSON, SUITE 330 TOPEKA, KS 66612
 1-866-865-3233 www.kshealthyhomes.org

GENERAL INFORMATION

A complete application includes (pursuant to K.A.R. 28-72-4):

1. A completed *Training Course Provider Accreditation Application* form
2. List of all Instructors
3. A copy of the student and instructor manuals
4. The Course agenda
5. The Course examination blueprint
6. A copy of the quality control plan
7. A copy of a sample course certificate
8. A description of the facilities and equipment to be used for lectures and hands-on training
9. A description of the activities and procedures that will be used for conducting the skills assessment for each course
10. A check or money order payable to KDHE/LEAD for the one time initial fee of \$500 plus the applicable nonrefundable course accreditation fees specified in K.A.R. 28-72-3, and
11. Documentation supporting the training manager's and principal instructor's qualifications

INCOMPLETE APPLICATIONS WILL DELAY PROCESSING OF APPLICATION AND ISSUANCE OF ACCREDITATION

- **Please type or print legibly.**
- **Mail completed application to:**
 Kansas Department of Health & Environment,
 Attn: Healthy Homes and Lead Hazard Prevention Program, Curtis Building,
 1000 SW Jackson, Suite 330, Topeka, KS 66612-1274.

KDHE USE ONLY	
Application	_____
Copy of Manual	_____
Course Agenda	_____
Blueprint	_____
Quality Control Plan	_____
Instructor	_____
Sample Course	_____
Description	_____
Qualification(s)	_____
Payment:	_____ Check: _____

PART A. PERSONAL INFORMATION

NAME OF TRAINING PROVIDER		LEAD ACTIVITY FIRM LICENSE NUMBER	
MAILING ADDRESS (STREET)			
CITY		STATE	ZIP
TELEPHONE NUMBER () _____ - _____	FAX NUMBER () _____ - _____		EMAIL ADDRESS
NAME OF TRAINING MANAGER		DATE OF BIRTH	
NAME OF PRINCIPAL INSTRUCTOR		DATE OF BIRTH	
NAME OF GUEST INSTRUCTOR	DATE OF BIRTH	NAME OF GUEST INSTRUCTOR	DATE OF BIRTH

PART B. LIST ALL TRAINING SITE ADDRESSES

PART C. TRAINING MANAGER QUALIFICATIONS (Please submit supporting documentation)

A minimum of one year experience in the construction industry including: lead or asbestos abatement, painting, carpentry, renovation, remodeling, safety and health, or industrial hygiene; and one (1) of the following:

- A minimum of two (2) years of experience in teaching or training adults, **or**
- A bachelor's degree in building construction technology, engineering, industrial hygiene, safety, public health, business administration, or education, **or**
- A minimum of two years of experience in managing a training program specializing in environmental hazards.

PART D. PRINCIPAL INSTRUCTOR QUALIFICATIONS (Please submit supporting documentation)

A Principal Instructor must have a minimum of one year of experience in lead or asbestos abatement, painting, carpentry, renovation, remodeling, occupational safety and health, or industrial hygiene, **OR** an associate degree or higher from a post secondary educational institution in building construction technology, engineering, safety, public health, or industrial hygiene. A Principal Instructor must also have:

- Successfully completed of at least 24 hours of any KDHE/ EPA-accredited lead-specific training, and
- A minimum of one year of experience in teaching or training adults.

PART E. ACCREDITATION FEES

CHECK ALL TRAINING COURSES THAT APPLY:

ACCREDITATION FEE REQUIRED FOR ALL APPLICANTS (REQUIRED FOR ALL) : \$500.00

<input type="checkbox"/>	INITIAL RISK ASSESSOR	\$1000.00
<input type="checkbox"/>	INITIAL ABATEMENT SUPERVISOR	\$1000.00
<input type="checkbox"/>	INITIAL ABATEMENT WORKER	\$1000.00
<input type="checkbox"/>	INITIAL PROJECT DESIGNER	\$1000.00
<input type="checkbox"/>	INITIAL WORKER - SPANISH	\$1000.00
<input type="checkbox"/>	INITIAL SUPERVISOR – SPANISH	\$1000.00
<input type="checkbox"/>	INITIAL LEAD SAFE WORK PRACTICES	\$300.00
<input type="checkbox"/>	REFRESHER RISK ASSESSOR	\$500.00
<input type="checkbox"/>	REFRESHER ABATEMENT SUPERVISOR	\$500.00
<input type="checkbox"/>	REFRESHER ABATEMENT WORKER	\$500.00
<input type="checkbox"/>	REFRESHER PROJECT DESIGNER	\$500.00
<input type="checkbox"/>	REFRESHER WORKER – SPANISH	\$500.00
<input type="checkbox"/>	REFRESHER SUPERVISOR - SPANISH	\$500.00
<input type="checkbox"/>	REFRESHER LEAD SAFE WORK PRACTICES	\$150.00

THIS APPLICATION WILL NOT BE ACCEPTED IF SIGNATURE IS OMITTED.

I hereby certify that the information included in this application and any supplemental information attached to it is true and accurate to the best of my knowledge and understanding. I further certify that I will comply with Sections 28-72-1 through 28-72-22 of the Kansas Administrative Regulations, and with any regulations promulgated pursuant to Sections 28-72-1 through 28-72-22 of the Kansas Administrative Regulations. I also attest and affirm that I will conduct lead training only in those occupations in which I have received accreditation.

SIGNATURE (TRAINING MANAGER)

DATE