



K A N S A S

DEPARTMENT OF HEALTH AND ENVIRONMENT

Household Hazardous Waste Eight-Hour Refresher Training Equivalent Training

1. HHW Facility _____ Permit # _____

Address _____
(Street or Rural Route) (City & State) (Zip)

Phone _____ Fax _____ E-mail (optional) _____

2. Person Requesting Equivalent Training _____
(Print Name) (Signature)

3. HHW Facility Manager _____
(Print Name) (Signature)

4. Description of training.

Course Title	Hours of Training	Course Description*

*Submit course documentation. (Flyer, Brochure, Course Syllabus, etc.)

Equivalent Training

Education or experience may be substituted for the required training, subject to approval by KDHE on an annual basis. A request must be submitted to the department on a form provided by the department at least 30 days prior to the date by which the training should be completed.

Examples of equivalent training could be:

- An academic degree, college courses, seminars, classes, or vocational courses in an appropriate field of study, e.g. environmental science, chemistry, or industrial safety.
- Experience with related chemical or safety procedures through working or on-the-job training through the following: the military, law enforcement, the fire department, or emergency management.

KDHE Approval _____
(Signature) (Date)