

Cincinnati-Hamilton County Homeland Security Training Course Registration

**Course Title: Public Safety WMD Response –
Sampling Techniques & Guidelines
January 12, 13 & 14, 2010**

PLEASE TYPE OR PRINT ALL INFORMATION

Name:	Current Job Position:
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Name & Address of Organization Represented:

Work Phone:	Mobile Phone:
Male <input type="checkbox"/> Female <input type="checkbox"/>	Fax:
Home Phone:	Email Address:

Complete the information below regarding the pre-requisites requirement

Training Course	Date Attended	Location
_____	_____	_____
_____	_____	_____

Do you have any disabilities (including allergies or medical conditions) which require special considerations? Yes No If yes, please describe

Briefly describe your job responsibilities as they relate to the course for which you are applying, and identify how you will use the information obtained from this course:

“I certify that the information recorded on this application is correct. I agree to abide by the policies stated in the most recently published Ohio Emergency Management Agency Training Catalog”

/	/
Applicant’s Signature	Date Supervisor’s Signature Date

Send Applications to: Cincinnati-Hamilton County Homeland Security
 Attention: Barry Webb, Training Coordinator
 Fax: 513.263.8095
 Email: Barry.Webb@hamilton-co.org
 Due Date: December 11, 2009