



Certified Lead Renovator Training

Initial Lead Renovator

This is an initial eight-hour lead renovator training for contractors and employees required by the United States Environmental Protection Agency to protect children during renovation, repair and painting activities that disturb lead-based paint. Beginning April 22, 2010, all contractors that disturb painted surfaces in pre-1978 housing, including window repair and window replacement, will be required to be certified renovators. Please see epa.gov/lead/pubs/renovation.htm for details about EPA requirements.

This training will be conducted in partnership with Midwest Training Institute, an EPA-accredited training provider. Topics include: the lead paint hazards, regulations, tools, personal protective equipment, work area setup, safe work practices, job completion procedures, and recordkeeping.

Course Number: CNST-6183-CEWB

Dates: March 9, 2010

Days: Tuesday

Location: SCC Continuing Education Center
301 S. 68th St. Place, Lincoln, NE • Room 302

Tuition: \$175

Sessions: 1

Time: 8 a.m.-5 p.m.

Instructor: Johnson

Refresher Lead Renovator

This is a refresher four-hour training for those who have previously completed an approved Lead Contractor, Lead Worker or eight-hour lead safe course. They may take the four-hour Renovator Refresher to become a certified Renovator.

This training will be conducted in partnership with Midwest Training Institute, an EPA-accredited training provider. Topics include: regulations, EPA-recognized test kits, work setup practices, personal protective equipment, dust control, cleaning activities, checking your work, recordkeeping, and training non-certified renovators.

Course Number: CNST-6184-CEWB

Dates: March 10, 2010

Days: Wednesday

Location: SCC Continuing Education Center
301 S. 68th St. Place, Lincoln, NE • Room 302

Tuition: \$175

Sessions: 1

Time: 8 a.m.-Noon

Instructor: Johnson

For more information, contact **Jerry Magorian** at 402-437-2508; 1-800-828-0072, ext. 2508; or jmagorian@southeast.edu.

REGISTRATION FORM - NON-CREDIT COURSE

Complete this form with payment information and send via FAX or mail to: **SCC-Continuing Education Center**
301 S. 68th Street Place, Lincoln, NE 68510
FAX: (402) 437-2703

PLEASE PRINT Include credit card information or Letter of Authorization for third-party billing. The College requires a student's Social Security number as a condition for enrollment. A student's Social Security number information constitutes an "educational record" under the Family Educational Rights and Privacy Act (FERPA). The College will be privileged to disclose that information only with the consent of the student or in those very limited circumstances when consent is not required by FERPA.

2010 QUARTER

<input type="checkbox"/> SUMMER	<input checked="" type="checkbox"/> WINTER
<input type="checkbox"/> FALL	<input type="checkbox"/> SPRING

Social Security Number		Name: Last		First	Middle Initial	E-mail address		
Residence Mailing Address				City	State	Zip	County #	
Birth Date		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Race: (Used for statistical purposes only) <input type="checkbox"/> White, Non-Hispanic <input type="checkbox"/> Hispanic/Latino(a) <input type="checkbox"/> Asian/Pacific Island <input type="checkbox"/> Black/African-American, Non-Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Other _____		Veteran or Dependent Utilizing Military Benefits <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Resident of Nebraska <input type="checkbox"/> Non-Resident of Nebraska	Home Phone

Please select all that apply: **Initial Lead Renovator • \$175**
March 9 • CNST-6183-CEWB

Refresher Lead Renovator • \$175
March 10 • CNST-6184-CEWB

SIGNATURE

Check Cash Mastercard Discover VISA V Code _____

Name as it appears on card: _____

Exp. Date _____ Credit card # _____

Billing agency (INCLUDE LETTER OF AUTHORIZATION ON COMPANY LETTERHEAD)

Submission of this form indicates that I understand: 1) that my registration is complete and that I am accountable for the tuition and fees and subject to a grade in the courses listed; 2) that should I officially drop, cancel, or withdraw, any refund in tuition will be determined by the date I submit my request to Continuing Education; 3) that failure to attend a course does not constitute an official drop/withdrawal; 4) the personal information contained herein is correct as shown; and 5) any changes in SSN, legal name, address, residency, etc. must follow the College procedures in the Student Handbook and College Catalog. It is the policy of SCC to provide equal opportunity and nondiscrimination in all admission, attendance, and employment matters to all persons without regard to race, color, religion, sex, age, marital status, national origin, ethnicity, veteran status, sexual orientation, disability, or other factors prohibited by law or College policy. Inquiries concerning the application of SCC's policies on equal opportunity and nondiscrimination should be directed to the Vice President for Access/Equity/Diversity, SCC Area Office, 301 S. 68th Street Place, Lincoln, NE 68510, 402-323-3412, FAX 402-323-3420, or jsoto@southeast.edu.

Staff/Department Discount	()
TOTAL DUE	
FOR OFFICE USE ONLY	
DE _____	ID# _____