

## Instructor Background And Information Form

P.O. Box 577

Canby, OR 97013-0577

Thank you for filling out this form.

	0 <del>-</del> 0				
Presentation	on Title: Asbestos Awareness				
Presenter:	Brian Warren Title: Regulatory Specialist				
Employer:	City of Pendleton         Address:         1501 SE Byers Ave.           Illeton         State:         OR         Zip:         97801         Phone:         541-969-3174				
City: Pend	leton	State:	OR Zip	97801	Phone: 541-969-3174
Summary of	of Lesson content: To provide we	orkers	the skills and	d knowledge	e needed to work safely and protect themselves
from an asbestos exposure. With regulations from OSHA requiring annual training on asbestos awareness, this class is					
to cover th	e requirements from OSHA & O	R-OSI	HA.		
Please be Use the rev Primary Kr	sure the resume includes all requested side of this form if more removed and sure of the s	uested om is to pres	d information needed to fu entation:	n. Qualificati ully answer to ad Chair of	be submitted in lieu of the following data. ons should be related to your presentation.) he following questions. he City of Pendleton Safety Committee; STS ountain Occupational Safety & Health Conf.
Education (High School, Upgrades, Colleges and Degrees): Troy University (Troy, AL)					
Professional Registration/Certification: Safety officer in private & public sectors; BCSP STS certified; OSHA 500 certified					
	ZWOPER 40 certified trainer				
•	pers/instruction you have prese				
Title:	rd Identification	Date:	2/3/2025	Even	t: Employee OESAC Training
Title FEMA	A ICS-100				t: Employee OESAC Training
Profession: BCSP	al Organizations/Activities:				Date:
ASSP					Date:
Course sponsor:City of Pendleton (543)					
Signature o	of Instructor:				Date: 2/13/2025
DO NOT WRITE BELOW THIS LINE					
Date Evalua	nted: By:				Approved: Yes No
Return Completed Form To: OESAC CEU COMMITTEE Email: info@oesac.org					

Phone: 503-698-6486