GENERAL INFORMATION

The training provider, in coordination with the training manager, shall designate a qualified principal instructor who meets the requirements in 19 CSR 30-70.320(8)(A). The principal instructor shall be responsible for the organization of the course and oversight of the teaching of all course materials.

An application to have an individual approved as a principal instructor shall include supporting documentation of the principal instructor's qualifications. Once a training course has been accredited any changes to the principal instructor must be submitted in writing to the Missouri Department of Health and Senior Services Lead Licensing Program for review and approval prior to continuation of the training course.

Note: A principal instructor is only approved for the training provider submitting the request. If a principal instructor decides to work for another training provider that training provider would be responsible for getting them approved as a principal instructor for their course(s).

• Mail **completed application** and the necessary documentation as evidence of meeting the requirements for principal instructor to:

Missouri Department of Health and Senior Services Environmental Public Health Lead Licensing Program P.O. Box 570 Jefferson City, MO 65102-0570

APPLICANT INFORMATION					
LEGAL NAME OF INSTRUCTOR FIRST	MIDDLE INITIAL		LAST		
NAME OF TRAINING PROVIDER (EMPLOYER)					
TRAINING PROVIDER'S STREET ADDRESS					
		T == 1.TE			
CITY		STATE	ZIP CODE		
TRAINING PROVIDER'S TELEPHONE NUMBER	TRAINING MANAGER'S NAME		TRAINING MANAGER'S E-MAIL ADDRESS		
 QUALIFICATIONS Complete this section and submit the appropriate documentation as evidence of meeting the requirements (see 19 					
CSR 30-70.320(8))	ibmit the appropriate docume	ntation as evide	ence of meeting the requirements (see 19		
		_			
The education and experience requirements for the principal instructor of a training course includes all of the following:					
☐ Successfully completed at least twenty-four (24) hours of any Lead Licensing Program(LLP) or Environmental					
Protection Agency (EPA) Accredited lead specific training (Enclose a course completion certificates issued by the LLP or EPA-accredited training provider as evidence of meeting the training requirements);					
or EPA-accredited training pr	ovider as evidence of meetin	g the training re	quirements);		
☐ A minimum of one (1) year of experience in teaching or training adults; and					
A minimum of one (1) 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					
			afety, public health, or industrial hygiene.		

EMPLOYMENT HISTORY					
 A resume can be used a be indicated on the result. 		on. Dates of employment, including months	s(s) and year(s), must		
EMPLOYER NAME					
EMPLOYER STREET ADDRESS		CITY			
STATE	ZIP CODE	DATES OF EMPLOYMENT (MONTH/YEAR)			
JOB DUTIES	<u> </u>	<u> </u>			
EMPLOYER NAME					
EMPLOYER STREET ADDRESS		CITY			
STATE	ZIP CODE	DATES OF EMPLOYMENT (MONTH/YEAR)			
JOB DUTIES		I			
EMPLOYER NAME					
EMPLOYER STREET ADDRESS		CITY			
STATE	ZIP CODE	DATES OF EMPLOYMENT (MONTH/YEAR)			
JOB DUTIES					
EMPLOYER NAME					
EMPLOYER STREET ADDRESS		CITY			
STATE	ZIP CODE	DATES OF EMPLOYMENT (MONTH/YEAR)			
JOB DUTIES					
PERSONAL INFORMATIO					
Has the principal instructor been convicted of a felony under state or federal law designed to protect the environment or human health? Yes No					
CERTIFICATION	•				
I hereby certify that all of the information provided in this application is complete and true to the best of my knowledge. I further certify that I will comply with Sections 701.300 through 701.338, RSMo, and with any regulations promulgated pursuant to Sections 701.300 through 701.338, RSMo.					
SIGNATURE OF APPLICANT	<u> </u>		DATE		