

NIOSH
schedule of courses
1985-86

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Centers for Disease Control

National Institute for Occupational Safety and Health

Division of Training and Manpower Development

Some courses listed are presented by NIOSH in cooperation with professional organizations or other institutions. These courses are designated in this schedule by a letter code in column six. It is important that applications be sent to the cooperating organizations or institutions at the following addresses. NIOSH can accept applications for only those courses presented solely by NIOSH. All others sent to NIOSH must be returned and may result in a delay of the processing of your application.

Federal employees should submit appropriate forms to their agencies, in addition to the application to the group offering the training, i.e., CES, NIOSH, R&R, Temple U.

APPLICATION CODES

A – CES

P.O. Box 75120
Cincinnati, Ohio 45275
(606) 341-8874
Attention: Chalres M. Nenadic

C – R&R Associates

P.O. Box 46181
Cincinnati, Ohio 45246
(513) 771-2490
Attention: Thomas Ratliff

B – National Institute for Occupational Safety and Health

Division of Training and Manpower Development
4676 Columbia Parkway
Cincinnati, Ohio 45226
(513) 533-8225
Attention: Donna Welage, Training Registrar

D – Temple University

School of Pharmacy
3307 North Broad Street
Philadelphia, Pennsylvania 19140
(215) 221-4915
Attention: Dr. Samuel Elkin

chronological schedule

Dates	Course Number	CEU's*	Course Title and Location	Tuition	Application Code
1985					
November 4-8	582	3.1	SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST - Cincinnati, Ohio NIOSH	\$420	B
December 16-19	582	3.1	SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST - Philadelphia, Pennsylvania NIOSH/TU	\$420	D
1986					
January 6-9	593	2.8	OCCUPATIONAL RESPIRATORY PROTECTION - Philadelphia, Pennsylvania NIOSH/TU	\$420	D
January 13-17	582	3.1	SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST - Cincinnati, Ohio NIOSH	\$420	B
February 4-6	597	2.1	HOW TO WRITE A LABORATORY QUALITY CONTROL MANUAL - Cincinnati, Ohio NIOSH/R&R	\$300	C
March 4-6	554	2.0	INDUSTRIAL HYGIENE SAMPLING, DECISION MAKING, MONITORING AND RECORDKEEPING: SAMPLING METHODS - Cincinnati, Ohio NIOSH/CES	\$300	A
March 10-14	582	3.1	SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST - Philadelphia, Pennsylvania NIOSH/TU	\$420	D
March 17-21	583	3.2	NONIONIZING RADIATION - Cincinnati, Ohio NIOSH	\$420	B
April 1-3	556	2.0	EVALUATION AND TREATMENT OF OUTLIER DATA - Cincinnati, Ohio NIOSH/R&R	\$300	C
April 14-25	551	6.5	INDUSTRIAL HYGIENE ENGINEERING - Cincinnati, Ohio NIOSH	\$760	B
April 28-May 2	553	3.1	INDUSTRIAL HYGIENE SAMPLING, DECISION MAKING, MONITORING AND RECORDKEEPING: SAMPLING STRATEGIES - Cincinnati, Ohio NIOSH/CES	\$420	A

*The C.E.U.'s listed are for a representative edition of the specified course. The C.E.U.'s awarded depend upon the individual course presentations. For descriptions of the courses listed, refer to the NIOSH Catalog of Courses. See page 7 of the Catalog for information on Continuing Education Credit (C.E.U.'s).

Dates	Course Number	CEU's*	Course Title and Location	Tuition	Application Code
1986					
May 5-8	510	2.8	RECOGNITION OF OCCUPATIONAL HEALTH HAZARDS - Philadelphia, Pennsylvania NIOSH/TU	\$360	D
July 7-11	582	3.1	SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST - Cincinnati, Ohio NIOSH	\$420	B
July 14-18	582	3.1	SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST - Cincinnati, Ohio NIOSH	\$420	B
July 21-24	593	2.8	OCCUPATIONAL RESPIRATORY PROTECTION - Cincinnati, Ohio NIOSH	\$420	B
August 4-8	584	3.2	IONIZING RADIATION - Cincinnati, Ohio NIOSH	\$420	B
August 18-22	588	3.1	INDUSTRIAL VENTILATION - Cincinnati, Ohio NIOSH/CES	\$420	A
August 25-29	587	3.1	INDUSTRIAL HYGIENE LABORATORY QUALITY CONTROL - Cincinnati, Ohio NIOSH/R&R	\$360	C
September 8-12	553	3.1	INDUSTRIAL HYGIENE SAMPLING, DECISION MAKING, MONITORING AND RECORDKEEPING: SAMPLING STRATEGIES - Cincinnati, Ohio NIOSH/CES	\$420	A
September 8-18	550	6.0	INDUSTRIAL HYGIENE MEASUREMENTS - Cincinnati, Ohio NIOSH	\$760	B

*The C.E.U.'s listed are for a representative edition of the specified course. The C.E.U.'s awarded depend upon the individual course presentations. For descriptions of the courses listed, refer to the NIOSH Catalog of Courses. See page 7 of the Catalog for information on Continuing Education Credit (C.E.U.'s).

topical schedule

Course Title	Course Number	Dates	
		1985	1986
industrial hygiene			
EVALUATION AND TREATMENT OF OUTLIER DATA	556		April 1-3
HOW TO WRITE A LABORATORY QUALITY CONTROL MANUAL	597		February 4-6
INDUSTRIAL HYGIENE ENGINEERING	551		April 14-25
INDUSTRIAL HYGIENE LABORATORY QUALITY CONTROL	587		August 25-29
INDUSTRIAL HYGIENE MEASUREMENTS	550		September 8-18
INDUSTRIAL HYGIENE SAMPLING, DECISION-MAKING, MONITORING AND RECORDKEEPING: SAMPLING METHODS	554		March 4-6
INDUSTRIAL HYGIENE SAMPLING, DECISION-MAKING, MONITORING AND RECORDKEEPING: SAMPLING STRATEGIES	553		April 28-May 2 September 8-12
INDUSTRIAL VENTILATION	588		August 18-22
RECOGNITION OF OCCUPATIONAL HEALTH HAZARDS	510		May 5-8
SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST	582	November 4-8 December 16-19	January 13-17 March 10-14 July 7-11 July 14-18
occupational safety			
IONIZING RADIATION	584		August 4-8
NONIONIZING RADIATION	583		March 17-21
OCCUPATIONAL RESPIRATORY PROTECTION	593		January 6-9 July 21-24

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH EDUCATIONAL RESOURCE CENTERS

Additional short term training will be offered by the NIOSH Educational Resource Centers.
These Centers are:

ALABAMA EDUCATIONAL RESOURCE CENTER

University of Alabama in Birmingham
School of Public Health
Medical Center, University Station
Birmingham, AL 35294
(205) 934-7032
Vernon E. Rose, D.P.H., Director

CALIFORNIA EDUCATIONAL RESOURCE CENTER —NORTHERN

University of California, Berkeley
206 Earl Warren Hall
Berkeley, CA 94720
(415) 642-0761
Robert C. Spear, Ph.D., Director

CALIFORNIA EDUCATIONAL RESOURCE CENTER —SOUTHERN

University of California, Irvine
Department of Community and Environmental Medicine
Irvine, CA 91717
(714) 752-2335
James Pierce, Sc.D., Director

CINCINNATI EDUCATIONAL RESOURCE CENTER

University of Cincinnati
Institute of Environmental Health
3223 Eden Avenue
Cincinnati, OH 42567
(513) 872-5701
Raymond S. Suskind, M.D., Director

HARVARD EDUCATIONAL RESOURCE CENTER

Department of Environmental Health Sciences
Harvard School of Public Health
665 Huntington Avenue
Boston, MA 02115
(617) 732-1260
Richard R. Monson, M.D., Director

ILLINOIS EDUCATIONAL RESOURCE CENTER

University of Illinois
School of Public Health
P.O. Box 6998
Chicago, IL 60680
(312) 996-7887
Bertram W. Carnow, M.D., Director

JOHNS HOPKINS EDUCATIONAL RESOURCE CENTER

Johns Hopkins University
School of Hygiene and Public Health
615 North Wolfe Street
Baltimore, MD 21205
(301) 955-3602
Morton Corn, M.D., Director

MICHIGAN EDUCATIONAL RESOURCE CENTER

University of Michigan
Department of Industrial and Operations Engineering
2260 S.G. Brown Laboratory
Ann Arbor, MI 48109
(313) 763-2245
(FTS 8-963-2245)
Don B. Chaffin, Ph.D., Director

MINNESOTA EDUCATIONAL RESOURCE CENTER

University of Minnesota
School of Public Health
1162 Mayo Memorial
420 Delaware Street, S.E.
Minneapolis, MN 55455
(512) 221-8770
Robert O. Mulhausen, M.D., Director

NEW YORK/NEW JERSEY EDUCATIONAL RESOURCE CENTER

Mt. Sinai School of Medicine
1 Gustave Levy Place
New York, NY 10029
(212) 650-6173
Philip J. Landrigan, M.D., Director

NORTH CAROLINA EDUCATIONAL RESOURCE CENTER

109 Conner Drive
Professional Village
346 A, Suite 1101
Chapel Hill, NC 27514
(919) 962-2101
David S. Fraser, Sc.D., Director

TEXAS EDUCATIONAL RESOURCE CENTER

The University of Texas Health Science Center at Houston
School of Public Health
P.O. Box 20186
Houston, TX 77025
(713) 792-7450
Edward Fairchild, Ph.D., Director

UTAH EDUCATIONAL RESOURCE CENTER

Rocky Mountain Center for Occupational and
Environmental Health
University of Utah Medical center
DFCM Room BC 106
Salt Lake City, UT 84132
(801) 581-8719
Jeffrey S. Lee, Ph.D., Director

WASHINGTON EDUCATIONAL RESOURCE CENTER

University of Washington
Department of Environmental Health SC-34
Seattle, WA 98195
(206) 543-1069
John T. Wilson, Jr., M.D., Director

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL
NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH**

APPLICATION FOR TRAINING

1. NAME AND ADDRESS OF APPLICANT (Please Type or Print):

Dr. Mr. Mrs. (Last) (First) (Middle Initial)
Ms. or Miss

Home (or office) Address

City/State Zip Code or County

2. COURSE DESIRED: No. _____ Date _____

Title

Location

3. PREVIOUS RELATED COURSES (List Most Recent First):

Date	Title	Institution

4. EMPLOYER: Federal State Local Government Other

Organization

Division/Unit

Local Address

City/State or County

ZIP Code _____ Applicant's Office Phone _____
(Area Code & No.)

5. PROFESSIONAL STATUS:

Occupation

Position Title

Brief Description of Present (or Expected) Position

Length of Time in Position _____, & in Profession _____

6. EDUCATION High School

Name of College(s)	No. Yrs. Completed	Date (Yr.) Completed	Degree

Other Training (Including Certification)

(Signature of Applicant) (Date)

(Name & Title of Approving Supervisor) (Date)

CDC 0.759B
REVISED 4-79

No applicant may be accepted for training unless a completed application form is received. (42 U.S.C. 243).

- Tuition enclosed
 - Tuition will be received by your office at least four weeks prior to the opening date of the course to hold my reservation.
- Make checks payable to sponsoring organization specified by the application code and mail to corresponding address.

PRIVACY ACT INFORMATION—The information requested on this form is collected under the authority of 5 U.S.C. 1302 . The requested information is used only to process and evaluate your application for training, and may be disclosed (for verification purposes) to your employer , educational institution , etc. , as necessary . Furnishing the information requested on this form is voluntary .

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL
NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH**

APPLICATION FOR TRAINING

FORM APPROVED
OMB NO. 68-R1232

1. NAME AND ADDRESS OF APPLICANT (Please Type or Print):

Dr. Mr. Mrs. (Last) (First) (Middle Initial)
Ms. or Miss

Home (or office) Address

City/State

Zip Code
or County

2. COURSE DESIRED: No. _____ Date _____

Title

Location

3. PREVIOUS RELATED COURSES (List Most Recent First):

Date	Title	Institution

4. EMPLOYER: Federal State Local Government Other

Organization

Division/Unit

Local Address

City/State or County

ZIP Code _____ Applicant's Office Phone _____
(Area Code & No.)

5. PROFESSIONAL STATUS:

Occupation

Position Title

Brief Description of Present (or Expected) Position

Length of Time in Position _____, & in Profession _____

6. EDUCATION High School

Name of College(s)	No. Yrs. Completed	Date (Yr.) Completed	Degree

Other Training (Including Certification)

(Signature of Applicant) (Date)

(Name & Title of Approving Supervisor) (Date)

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

PUBLIC HEALTH SERVICE

CENTERS FOR DISEASE CONTROL

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH

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