

# RIT OSHA COURSE REGISTRATION

Name

Title

RIT Graduating  
Class Year

Degree Program

Email

Primary Phone

Organization/  
Company

Address 1

Address 2

City

State

ZIP Code

**Privacy:** RIT will keep private any information that you provide. This information is stored and used to respond to your requests, alert you to future education and training opportunities, and update you on our programs and services. WE do not share or sell any of the information you provide.

Course Title

Date

Course Title

Date

Course information: Course #500 and #501 require a prerequisite verification form and a copy of OSHA 510/511 certificate. Course #502 and #503 require a copy of your current trainer card to accompany this registration form.

## To register, complete this form and submit:

By email to Donna Winter at [donna.winter@rit.edu](mailto:donna.winter@rit.edu) By fax to 585.475.6292

By mail to RIT, OSHA Education Center, 31 Lomb Memorial Drive, Rochester, NY 14623-5603

Course registrations will be confirmed upon receipt of this form and verification of alumni status.

## RIT OSHA Education Center

866.385.7470 ext. 2919

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