

**Associated Builders & Contractors
Of Southeast Texas
Construction Training Center
2700 North Twin City Hwy.
P.O. Box 1566 Nederland, TX 77627
409-724-7886 Fax: 409-724-2915**

**General Information
For
Construction Site Safety Technician Course**

Prerequisites:

Education	High school diploma or Graduate Equivalency Diploma (GED) WOL Basic Math Module #00102 OSHA 500 (current card)
Experience	Have three years of work experience in construction or two years of work experience as a construction foreman, first line supervisor, job superintendent or manager, or two years of work experience where at least 35% of job duties involve safety and health.
Letters of Reference	Minimum of three (one from construction supervisor)
Resume	Documenting construction work experience
Previous Safety Training	Attach documentation
Application Form	Completed and signed by student
Knowledge Survey	Completed
Tuition	Payable in advance to ABC Training Center
ABC	Member Company Trainees \$675.00
ABC	Non-Member Company \$975.00

* Certificates cannot be issued to students until these requirements are met.

Evaluation Standards:

Passing	70%
Remediation and Retest	Only one retest
Retake Course	Class average of less than 70%
Attendance	70%

Class Schedule:

Classes are scheduled 6 p.m. to 9 p.m. Monday- Wednesday or Tuesday-Thursday.

Certificate of completion on successfully completing two (2) ten-week quarters.

Note: These standards apply to all unit tests and final examination grades. Students must take and pass all exams and maintain attendance requirements in order to earn the Construction Site Safety Technician certificate.

100-Hour Safety Technician

This course provides a journey-level craftsman or job site, foreman the instruction needed to coordinate a construction site project safety program. The course consists of 40 modules including confined spaces; all OSHA 500 topics; media-Relations; includes **First Aid & CPR Certifications.**

**Construction Site Safety Technician
CSST
Training Program Application**

Date of Application _____

Name _____ SS# _____
Last First Middle

Mailing Address _____

City _____ State _____ Zip _____

Home Phone () _____ Work Phone () _____

Employer _____ Position _____

Supervisor's Signature _____ Title _____

Sponsor: ABC Member _____ Non-Member _____

Check the following items that you have attached to your application.

Required:

Resume _____ Reference Letters _____ Knowledge Survey _____

Applications must be returned to the Training Center Office upon completion.

TUITION MUST BE PAID IN FULL PRIOR TO ATTENDING CLASS

All tuition submitted through company direct pay must be completed prior to attending class. It is the responsibility of the student to get reimbursement through their company.

Print Name _____ Date _____

Signature _____

Construction Site Safety Technician- Knowledge Survey

Please Circle the number which best describes your experience and training in each course bellow.

1 None 2 Very little 3 Some 4 Quite a bit 5 Extensive

	<i>Experience</i>		<i>Training</i>	
	1 2 3 4 5		1 2 3 4 5	
Communication Skills	1 2 3 4 5		1 2 3 4 5	
OSHA 500: Construction Stds.	1 2 3 4 5		1 2 3 4 5	
HAZCOM: Hazard Communications	1 2 3 4 5		1 2 3 4 5	
Accident Investigation	1 2 3 4 5		1 2 3 4 5	
Excavation Safety	1 2 3 4 5		1 2 3 4 5	
OSHA 200: Record Keeping	1 2 3 4 5		1 2 3 4 5	
Personal Protective Equipment	1 2 3 4 5		1 2 3 4 5	
Respiratory Protection	1 2 3 4 5		1 2 3 4 5	
First Aid/CPR	1 2 3 4 5		1 2 3 4 5	
Crane Safety Awareness	1 2 3 4 5		1 2 3 4 5	
Substance Abuse	1 2 3 4 5		1 2 3 4 5	
Fire Protection	1 2 3 4 5		1 2 3 4 5	
Life Safety	1 2 3 4 5		1 2 3 4 5	
Control of Hazardous Energy	1 2 3 4 5		1 2 3 4 5	
Industrial Hygiene	1 2 3 4 5		1 2 3 4 5	
Medical Surveillance	1 2 3 4 5		1 2 3 4 5	
Work Permits	1 2 3 4 5		1 2 3 4 5	
Atmospheric Testing	1 2 3 4 5		1 2 3 4 5	
Confined Space	1 2 3 4 5		1 2 3 4 5	
Scaffolding Safety	1 2 3 4 5		1 2 3 4 5	
Fall Protection	1 2 3 4 5		1 2 3 4 5	
HAZWOPER : Worker	1 2 3 4 5		1 2 3 4 5	
HAZWOPER: Supervisor	1 2 3 4 5		1 2 3 4 5	
Process Safety Management	1 2 3 4 5		1 2 3 4 5	

Print Name _____ SS# _____ / _____ / _____

Signature _____ Date _____