



MONTANA APPLICATION FOR ASBESTOS TRAINING COURSE APPROVAL

DEQ USE ONLY

(Applicant – Registered Business Name)

(Address)

(City) (State) (Zip)

(Contact) (Telephone Number)

(Email Address) (Fax Number)

Date Received _____

Amount Received _____

Receipt Number _____

Check Number _____

Date Approved _____

Effective Date _____

Evaluation Date _____

Initials _____

ORG	ACCT	FUND
574836	502703	02202

Course Director: _____

1. Title of Course
(Please check one Occupation and one Course Type only)

Occupation		Course Type			
<input type="checkbox"/>	Contractor/Supervisor	<input type="checkbox"/>	Initial	<input type="checkbox"/>	Refresher
<input type="checkbox"/>	Inspector	<input type="checkbox"/>	Initial	<input type="checkbox"/>	Refresher
<input type="checkbox"/>	Management Planner	<input type="checkbox"/>	Initial	<input type="checkbox"/>	Refresher
<input type="checkbox"/>	Project Designer	<input type="checkbox"/>	Initial	<input type="checkbox"/>	Refresher
<input type="checkbox"/>	Worker	<input type="checkbox"/>	Initial	<input type="checkbox"/>	Refresher

2. Type of Application: (Please check appropriate box)
 Original Course Approval Fee: \$1100.00

- 3. Please provide the following:** (Please check if provided)
- 1. A detailed curriculum outline
 - 2. A copy of the course examination.
 - 3. A copy of all written course materials.
 - 4. A list of titles for all audio/visual course materials and, where possible, hard copy for all visual materials.
 - 5. A copy of an unused or blank certification of satisfactory completion form.
 - 6. A list of instructors and documentation of the instructor's qualifications, including accreditation number.
 - 7. A description of hands-on training to be used in the course.
 - 8. A course schedule indicating time allotted and the instructor for each subject.
 - 9. Documentation of EPA course approval or other states approval, if applicable.
 - 10, A listing of scheduled courses including dates, times, and locations. DEQ must be notified of course dates 10 working days prior to course offerings.
 - 11. Documentation of examination security.

MAIL TO: Montana Department of Environmental Quality
 Waste & Underground Tank Management Bureau
 Asbestos Control Program
 1520 East 6th Ave
 P.O. Box 200901
 Helena MT 59620-0901

Telephone: (406) 444-5300

The time estimated by the department to process and make a determination on a complete application for Asbestos Training Course Approval is 45 calendar days.