



TTT Class date desired:  
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P.O. BOX 850359, YUKON, OK 73085  
PHONE: 405.422.2311 | 405.422.2307 | FAX: 1.866.946.3063

## Instructor Application

Please complete the form in its entirety and return with a complete resume to [etc@cvtech.edu](mailto:etc@cvtech.edu)  
This is a 3 day class for ETC members only and will be invoiced at \$300.00. There will be a \$100 application fee due at the time of submission. If approved for the class, the \$100 application fee will be applied to the course fee.

### Applicant- Company Information (Training Provider)

Name of Company:		Fed. Tax ID#:
Company Website Address:		
Street Address:		
City:	State:	Zip:
Work Position / Title		Time in Current Position:
Work Email Address:		Phone:

### Applicant- Personal Information (Instructor)

Last Name:	First Name:	Last 4 digits SSN:
Street Address:		Apt./ Unit #
City:	State:	Zip:
Phone:	E-mail Address:	

### Educational Background

College: YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Technical School:		
Other:		

### HSE Related – Professional Certifications and / or Instructor Certifications\*

Certification		Issuing Organization	
Certification		Issuing Organization	
Certification		Issuing Organization	
Certification		Issuing Organization	

### Experience in Providing Classroom Instruction\* (Please check all HSE courses you have taught in the last 3 years)

Changes in the Workplace <input type="checkbox"/>	Personal Protective Equipment <input type="checkbox"/>	Hazard Communications <input type="checkbox"/>	Occupational Health <input type="checkbox"/>	Forklift/Aerial lift Training <input type="checkbox"/>	
Process Safety Management <input type="checkbox"/>	Safety Analysis <input type="checkbox"/>	Hazardous Energy Control <input type="checkbox"/>	Fire Safety-Prevention <input type="checkbox"/>	First Aid & Bloodborne Pathogens <input type="checkbox"/>	
Electrical Safety <input type="checkbox"/>	Confined Spaces Safety <input type="checkbox"/>	Evacuation Safety <input type="checkbox"/>	Elevated Work <input type="checkbox"/>	Hydrogen Sulfide (H <sub>2</sub> S) <input type="checkbox"/>	NORM Awareness <input type="checkbox"/>
Other (Please List)					

**\* Please submit copies of certifications, authorizations, and other credentials to aid in establishing applicant's qualifications. For topics identified above, provide details on resume concerning classroom instruction experience and when the class was taught and how often. Do NOT include monthly safety meetings or tailgate/toolbox.**

**ETC SafeLand Instructor – Applicant Qualification Checklist\***

Experience in classroom instruction?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<i>*must be detailed on resume</i>
Currently employed as a safety professional or trainer?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<i>*must be detailed on resume</i>
Minimum of 6 months experience in Oil & Gas industry?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<i>*must be detailed on resume</i>
Minimum of 1 year experience in providing HSE related services?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<i>*must be detailed on resume</i>
Minimum of 50% of applicant's current job dedicated to providing Services related to health and safety programs?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<i>*must be detailed on resume</i>

**COMMENTS** (if answering "NO" to any of the above requirements to become an authorized ETC SafeLand USA instructor, please comment and provide supporting documentation of related experience you are asking to be considered):

**PRIOR ETC SafeLandUSA Instructor AND/OR Record of ETC SafeLandUSA Orientation**

Has the applicant ever previously been an authorized ETC instructor?	<input type="checkbox"/> YES <input type="checkbox"/> NO	When?	Instructor ID#
Has the applicant previously applied?	<input type="checkbox"/> YES <input type="checkbox"/> NO	When?	
Has the applicant previously attended an ETC class?	<input type="checkbox"/> YES <input type="checkbox"/> NO	When?	ETC Card ID#

**Additional Documents Required**

- All applicants must complete and submit the Instructor Application along with the following:
1. A detailed resume (resume should match information from application)
  2. Any supporting HSE credentials such as certificates
  3. A copy of their driver's license

**Acknowledgement** (sign and date below)

All applicants must complete and submit the Instructor Application along with a **detailed resume**, supporting HSE credentials, **and** a copy of their driver's license.

Submission of this application does not guarantee acceptance into the Train-the-Trainer Program. All instructor applications shall be reviewed by the Instructor Approval Committee. ETC approval is required prior to attending a Train-the-Trainer course.

By my signature below, I certify that my answers including any documentation that I have provided is true and accurate. I understand that any false or misleading information I knowingly provided may result in discharge and/or revocation of instructor authorization. I understand that if I become an authorized ETC Instructor, I am required to conduct classes in accordance to ETC Policy & Procedure. Authorization as an ETC Instructor may be suspended or revoked at any time by ETC.

**Signature:**

**Date:**

**Application will not be accepted without applicant's signature and date.**