



Application for Propane Safety Training Program Approval
An application is required for each course offered.

Organization Offering Training

Name: Phone Number: ()

Address, City, State, Zip:

Training Coordinator and Trainer(s)

Training Coordinator: Phone Number: ()

Email Address:

Trainer(s):

(Attach a brief resume for each trainer.)

Course Information

Name of course (indicate one): Basic Principles & Practices Dispensing Propane Application Service HVAC

Goals:

Learning Objectives:

Is the training led by an instructor? Yes No If no, how is it delivered?

Is the training "hands-on"? Yes No Explain:

Length of the training in hours: How often is the course offered each year?

Jobs/Areas to which the course is tailored (Check all that apply): LPG Dispensing Cylinder Exchange Cylinder Sales/Service Installation/Service, Low Pressure Installation/Service, High Pressure Transporter Liquid Meter Repair/Service Carburetion LPG Service Station

To whom is the course offered? Employees of Public

In what towns/cities is the course offered?

The curriculum is: based on the Propane Education & Research Council's (PERC) Certified Employee Training Program (CETP). equivalent to the Propane Education & Research Council's (NPGA) Certified Employee Training Program (CETP).

Is the program nationally recognized or equivalent to a nationally recognized program? Yes No

Training materials used:

Does the training include information on applicable Missouri statutes and regulations governing liquefied petroleum gases? Yes No

(Attach outline of content.)

Learning methods/activities (check all that apply): Lecture DVD/Video Discussion Short tests Questions/Answers Reading Demonstration by trainer Demonstration by student

Is a written examination administered? Yes No If yes, what is the passing score? %

How many questions are included on the exam? Name of third-party grader:

(Attach list of areas covered by exam.)

To successfully complete the course, attendees must (check all that apply): attend training pass exam pass skills assessment

Do you ask attendees to complete a course evaluation? Yes No

Other information that may aid in the review of this application:

Training Coordinator's Signature

Date