

**NIOSH**  
*schedule of courses*  
**1984-85**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Centers for Disease Control

National Institute for Occupational Safety and Health

Division of Training and Manpower Development

Some courses listed are presented by NIOSH in cooperation with professional organizations or other institutions. These courses are designated in this schedule by a letter code in column six. It is important that applications be sent to the cooperating organizations or institutions at the following addresses. NIOSH can accept applications for only those courses presented solely by NIOSH. All others sent to NIOSH must be returned and may result in a delay of the processing of your application.

Federal employees should submit appropriate forms to their agencies in addition to the application to the group offering the training, i.e., CES, NIOSH, R&R, Temple U.

#### APPLICATION CODES

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**A – CES**

P.O. Box 75120  
Cincinnati, Ohio 45275  
(606) 341-8874  
Attention: Charles M. Nenadic

**C – R&R Associates**

P.O. Box 46181  
Cincinnati, Ohio 45246  
(513) 771-2490  
Attention: Thomas Ratliff

**B – National Institute for Occupational Safety and Health**

Division of Training and Manpower Development  
4676 Columbia Parkway  
Cincinnati, Ohio 45226  
(513) 684-8225  
Attention: Donna Welage, Training Registrar

**D – Temple University**

School of Pharmacy  
3307 North Broad Street  
Philadelphia, Pennsylvania 19140  
(215) 221-4915  
Attention: Dr. Samuel Elkin

# chronological schedule

Dates	Course Number	CEU's*	Course Title and Location	Tuition	Application Code
<b>1984</b>					
December 17-21	582	3.1	<b>SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST</b> – Philadelphia, Pennsylvania NIOSH/TU	\$420	D
<b>1985</b>					
January 7-11	593	3.1	<b>OCCUPATIONAL RESPIRATORY PROTECTION</b> – Philadelphia, Pennsylvania NIOSH/TU	\$420	D
February 5-7	597	2.1	<b>HOW TO WRITE A LABORATORY QUALITY CONTROL MANUAL</b> – Cincinnati, Ohio NIOSH/R&R	\$300	C
March 5-7	554	2.0	<b>INDUSTRIAL HYGIENE SAMPLING, DECISION MAKING, MONITORING AND RECORDKEEPING: SAMPLING METHODS</b> – Cincinnati, Ohio NIOSH/CES	\$300	A
March 25-29	583	3.2	<b>NONIONIZING RADIATION</b> – Cincinnati, Ohio NIOSH	\$420	B
April 2-4	556	2.0	<b>EVALUATION AND TREATMENT OF OUTLIER DATA</b> – Cincinnati, Ohio NIOSH/R&R	\$300	C
April 15-26	551	6.5	<b>INDUSTRIAL HYGIENE ENGINEERING</b> – Cincinnati, Ohio NIOSH	\$760	B
April 29-May 3	553	3.1	<b>INDUSTRIAL HYGIENE SAMPLING, DECISION MAKING, MONITORING AND RECORDKEEPING: SAMPLING STRATEGIES</b> – Cincinnati, Ohio NIOSH/CES	\$420	A
May 6-10	510	3.1	<b>RECOGNITION OF OCCUPATIONAL HEALTH HAZARDS</b> – Philadelphia, Pennsylvania NIOSH/TU	\$360	D
July 8-12	582	3.1	<b>SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST</b> – Cincinnati, Ohio NIOSH	\$420	B

\*The C.E.U.'s listed are for a representative edition of the specified course. The C.E.U.'s awarded depend upon the individual course presentations. For descriptions of the courses listed, refer to the NIOSH Catalog of Courses. See page 7 of the Catalog for information on Continuing Education Credit (C.E.U.'s).

Dates	Course Number	CEU's*	Course Title and Location	Tuition	Application Code
<b>1985</b>					
July 15-19	582	3.1	<b>SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST</b> - Cincinnati, Ohio NIOSH	\$420	B
July 22-25	593	3.1	<b>OCCUPATIONAL RESPIRATORY PROTECTION</b> - Cincinnati, Ohio NIOSH	\$420	B
August 5-9	584	3.2	<b>IONIZING RADIATION</b> - Cincinnati, Ohio NIOSH	\$420	B
August 19-23	588	3.1	<b>INDUSTRIAL VENTILATION</b> - Cincinnati, Ohio NIOSH/CES	\$420	A
August 26-30	587	3.1	<b>INDUSTRIAL HYGIENE LABORATORY QUALITY CONTROL</b> - Cincinnati, Ohio NIOSH/R&R	\$360	C
September 9-13	553	3.1	<b>INDUSTRIAL HYGIENE SAMPLING, DECISION MAKING, MONITORING AND RECORDKEEPING: SAMPLING STRATEGIES</b> - Cincinnati, Ohio NIOSH/CES	\$420	A
September 9-19	550	6.0	<b>INDUSTRIAL HYGIENE MEASUREMENTS</b> - Cincinnati, Ohio NIOSH	\$760	B

\*The C.E.U.'s listed are for a representative edition of the specified course. The C.E.U.'s awarded depend upon the individual course presentations. For descriptions of the courses listed, refer to the NIOSH Catalog of Courses. See page 7 of the Catalog for information on Continuing Education Credit (C.E.U.'s).

# topical schedule

Course  
Number

Course Title

Dates — 1985

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## industrial hygiene

510	RECOGNITION OF OCCUPATIONAL HEALTH HAZARDS	May 6–10
550	INDUSTRIAL HYGIENE MEASUREMENTS	September 9–19
551	INDUSTRIAL HYGIENE ENGINEERING	April 15–26
553	INDUSTRIAL HYGIENE SAMPLING, DECISION MAKING, MONITORING AND RECORDKEEPING: SAMPLING STRATEGIES	April 29–May 3 ■ September 9–13
554	INDUSTRIAL HYGIENE SAMPLING, DECISION MAKING, MONITORING AND RECORDKEEPING: SAMPLING METHODS	March 5–7
556	EVALUATION AND TREATMENT OF OUTLIER DATA	April 2–4
582	SAMPLING AND EVALUATING AIRBORNE ASBESTOS DUST	December 17–21, 1984 July 8–12 ■ July 15–19
587	INDUSTRIAL HYGIENE LABORATORY QUALITY CONTROL	August 26–30
588	INDUSTRIAL VENTILATION	August 19–23
597	HOW TO WRITE A LABORATORY QUALITY CONTROL MANUAL	February 5–7

## occupational safety

583	NONIONIZING RADIATION	March 25–29
584	IONIZING RADIATION	August 5–9
593	OCCUPATIONAL RESPIRATORY PROTECTION	January 7–11 ■ July 22–25

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH  
EDUCATIONAL RESOURCE CENTERS

Additional short-term training will be offered by the NIOSH Educational Resource Centers. These Centers are:

**ALABAMA EDUCATIONAL RESOURCE CENTER**

University of Alabama in Birmingham  
School of Public Health  
Medical Center, University Station  
Birmingham, AL 35294  
(205) 934-7032  
*Vernon E. Rose, D.P.H., Director*

**ARIZONA EDUCATIONAL RESOURCE CENTER**

University of Arizona  
Arizona Health Sciences Center  
1145 North Warren - ACOSH  
Tucson, AZ 87524  
(602) 626-6835  
*Clifton Crutchfield, Ph.D., Acting Director*

**CALIFORNIA EDUCATIONAL RESOURCE CENTER  
-NORTHERN**

University of California, Berkeley  
206 Earl Warren Hall  
Berkeley, CA 94720  
(415) 642-0761  
*Robert C. Spear, Ph.D., Director*

**CALIFORNIA EDUCATIONAL RESOURCE CENTER  
-SOUTHERN**

University of California, Irvine  
Department of Community and Environmental Medicine  
Irvine, CA 91717  
(714) 752-2335  
*James Pierce, Sc.D., Director*

**CINCINNATI EDUCATIONAL RESOURCE CENTER**

University of Cincinnati  
Institute of Environmental Health  
3223 Eden Avenue  
Cincinnati, OH 45267  
(513) 872-5701  
*Raymond S. Suskind, M.D., Director*

**HARVARD EDUCATIONAL RESOURCE CENTER**

Department of Environmental Health Sciences  
Harvard School of Public Health  
665 Huntington Avenue  
Boston, MA 02115  
(617) 732-1260  
*Richard R. Monson, M.D., Director*

**ILLINOIS EDUCATIONAL RESOURCE CENTER**

University of Illinois  
School of Public Health  
P.O. Box 6998  
Chicago, IL 60680  
(312) 996-7887  
*Bertram W. Carnow, M.D., Director*

**JOHNS HOPKINS EDUCATIONAL RESOURCE CENTER**

Johns Hopkins University  
School of Hygiene and Public Health  
615 North Wolfe Street  
Baltimore, MD 21205  
(301) 955-3602  
*Morton Corn, M.D., Director*

**MICHIGAN EDUCATIONAL RESOURCE CENTER**

University of Michigan  
Department of Industrial and Operations Engineering  
2260 S.G. Brown Laboratory  
Ann Arbor, MI 48109  
(313) 763-2245  
(FTS 8-963-2245)  
*Don B. Chaffin, Ph.D., Director*

**MINNESOTA EDUCATIONAL RESOURCE CENTER**

University of Minnesota  
School of Public Health  
1162 Mayo Memorial  
420 Delaware Street, S.E.  
Minneapolis, MN 55455  
(612) 221-8770  
*Robert O. Mulhausen, M.D., Director*

**NEW YORK/NEW JERSEY EDUCATIONAL  
RESOURCE CENTER**

Mt. Sinai School of Medicine  
1 Gustave Levy Place  
New York, NY 10029  
(212) 650-6173  
*Irving J. Selikoff, M.D., Director*

**NORTH CAROLINA EDUCATIONAL  
RESOURCE CENTER**

109 Conner Drive  
Professional Village  
346 A, Suite 1101  
Chapel Hill, NC 27514  
(919) 962-2101  
*David S. Fraser, Sc.D., Director*

**TEXAS EDUCATIONAL RESOURCE CENTER**

The University of Texas Health Science Center at Houston  
School of Public Health  
P.O. Box 20186  
Houston, TX 77025  
(713) 792-7450  
*Edward Fairchild, Ph.D., Director*

**UTAH EDUCATIONAL RESOURCE CENTER**

Rocky Mountain Center for Occupational and  
Environmental Health  
University of Utah Medical Center  
DFCM Room BC 106  
Salt Lake City, UT 84132  
(801) 581-8719  
*Jeffrey S. Lee, Ph.D., Director*

**WASHINGTON EDUCATIONAL RESOURCE CENTER**

University of Washington  
Department of Environmental Health SC-34  
Seattle, WA 98195  
(206) 543-1069  
*John T. Wilson, Jr., M.D., Director*

**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
PUBLIC HEALTH SERVICE  
CENTERS FOR DISEASE CONTROL  
NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH**

**APPLICATION FOR TRAINING**

FORM APPROVED  
OMB NO. 68-R1232

**1. NAME AND ADDRESS OF APPLICANT (Please Type or Print):**

Dr. Mr. Mrs. (Last) (First) (Middle Initial)

Ms. or Miss

Home (or office) Address

City/State

Zip Code  
or County

**2. COURSE DESIRED: No. \_\_\_\_\_ Date \_\_\_\_\_**

Title

Location

**3. PREVIOUS RELATED COURSES (List Most Recent First):**

Date	Title	Institution

**4. EMPLOYER:**  Federal  State  Local Government  Other

Organization

Division/Unit

Local Address

City/State or County

ZIP Code \_\_\_\_\_ Applicant's Office Phone \_\_\_\_\_

(Area Code & No.)

**5. PROFESSIONAL STATUS:**

Occupation

Position Title

Brief Description of Present (or Expected) Position

Length of Time in Position \_\_\_\_\_, & in Profession \_\_\_\_\_

**6. EDUCATION**  High School

Name of College(s)	No. Yrs. Completed	Date (Yr.) Completed	Degree

Other Training (Including Certification)

(Signature of Applicant)

(Date)

(Name & Title of Approving Supervisor)

(Date)

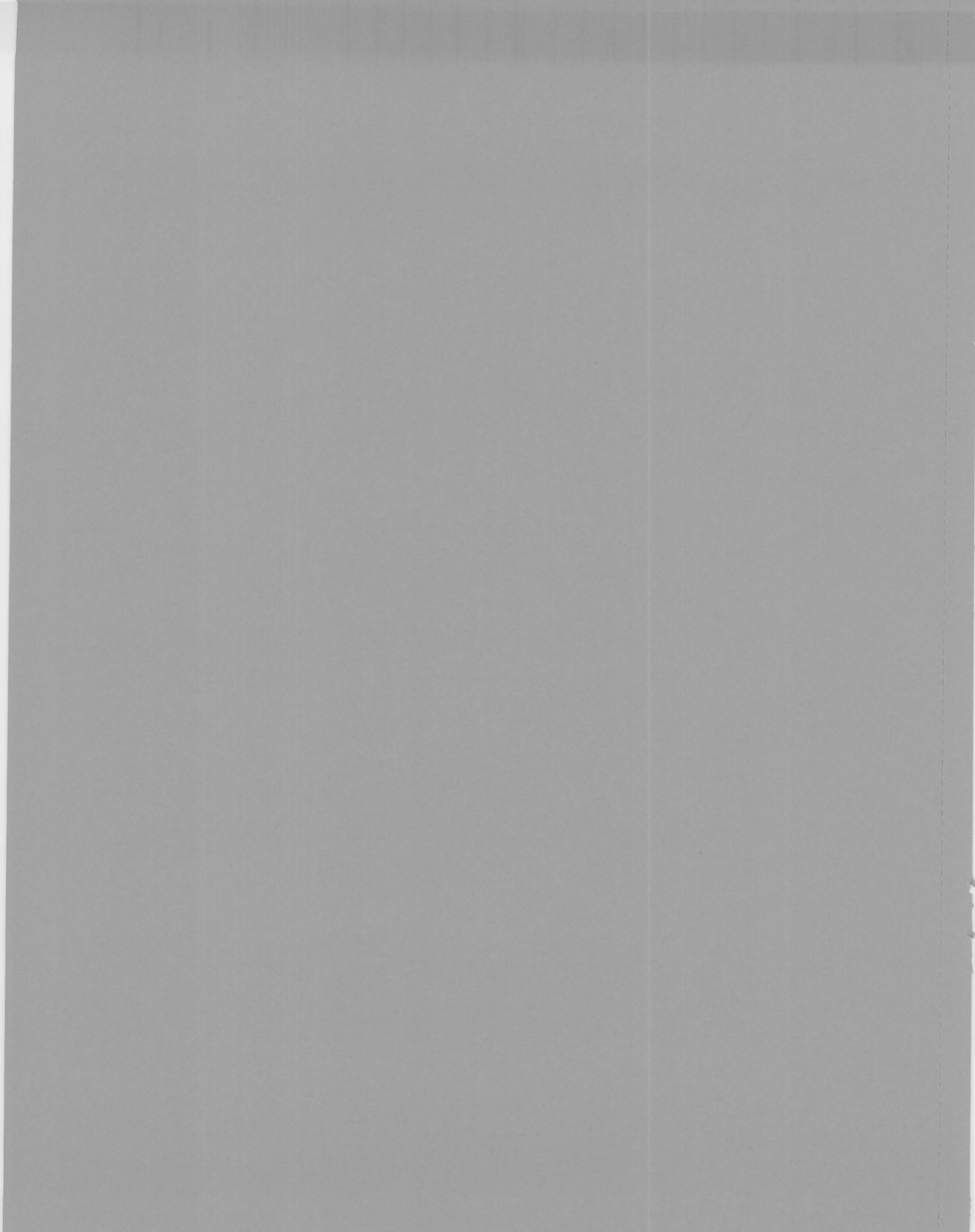
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REVISED 4-79

No applicant may be accepted for training unless a completed application form is received. (42 U.S.C. 243).

- Tuition enclosed
- Tuition will be received by your office at least four weeks prior to the opening date of the course to hold my reservation.

Make checks payable to sponsoring organization specified by the application code and mail to corresponding address.

**PRIVACY ACT INFORMATION**—The information requested on this form is collected under the authority of 5 U.S.C. 1302. The requested information is used only to process and evaluate your application for training, and may be disclosed (for verification purposes) to your employer, educational institution, etc., as necessary. Furnishing the information requested on this form is voluntary.



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
PUBLIC HEALTH SERVICE  
CENTERS FOR DISEASE CONTROL  
NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH**

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OMB NO. 68-R1232

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Dr. Mr. Mrs. (Last) (First) (Middle Initial)  
Ms. or Miss

Home (or office) Address

City/State Zip Code  
or County

**2. COURSE DESIRED: No. \_\_\_\_\_ Date \_\_\_\_\_**

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**4. EMPLOYER:**  Federal  State  Local Government  Other

Organization

Division/Unit

Local Address

City/State or County

ZIP Code \_\_\_\_\_ Applicant's Office Phone \_\_\_\_\_  
(Area Code & No.)

**5. PROFESSIONAL STATUS:**

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Name of College(s)	No. Yrs. Completed	Date (Yr.) Completed	Degree

Other Training (Including Certification)

\_\_\_\_\_  
(Signature of Applicant) (Date)

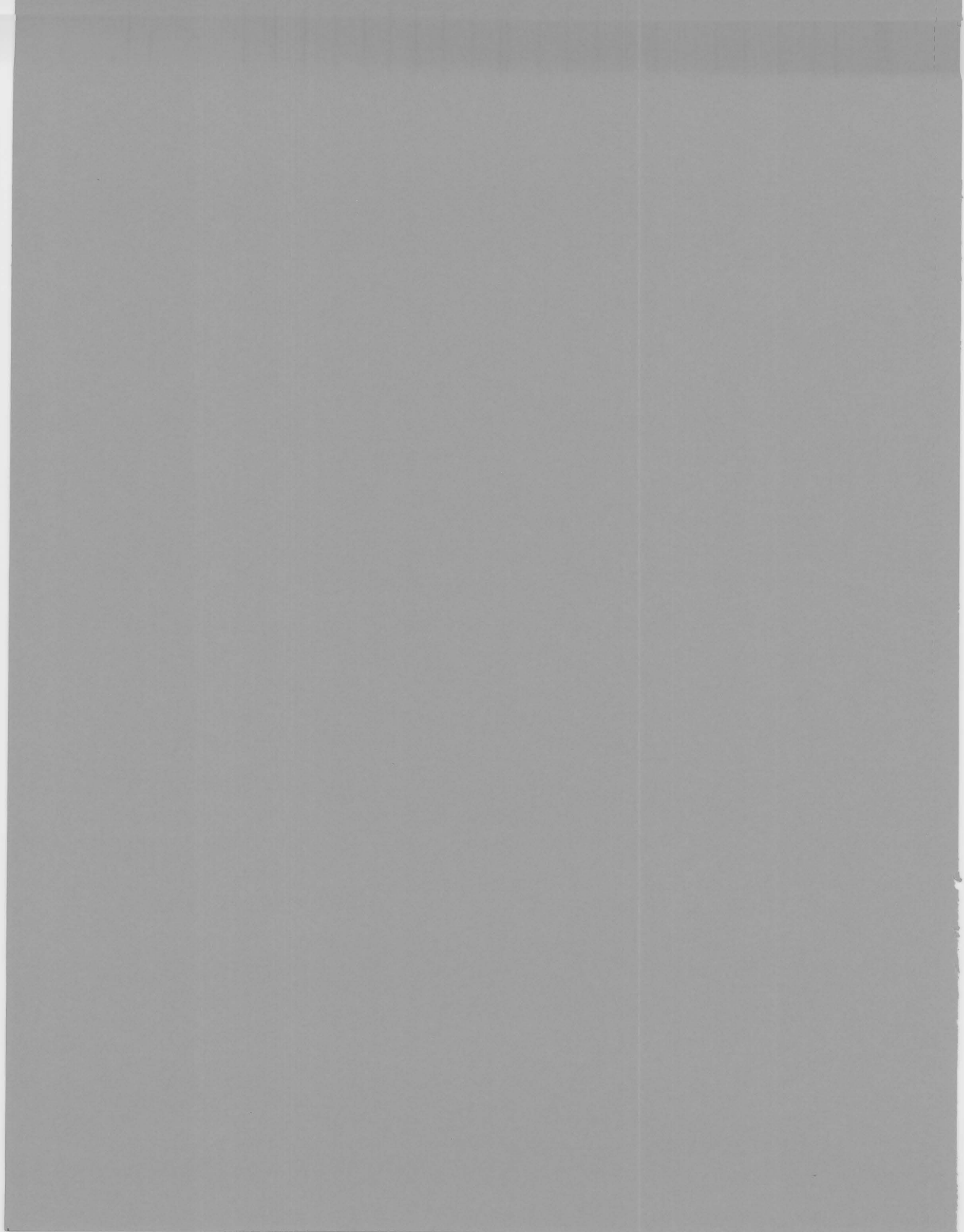
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(Name & Title of Approving Supervisor) (Date)

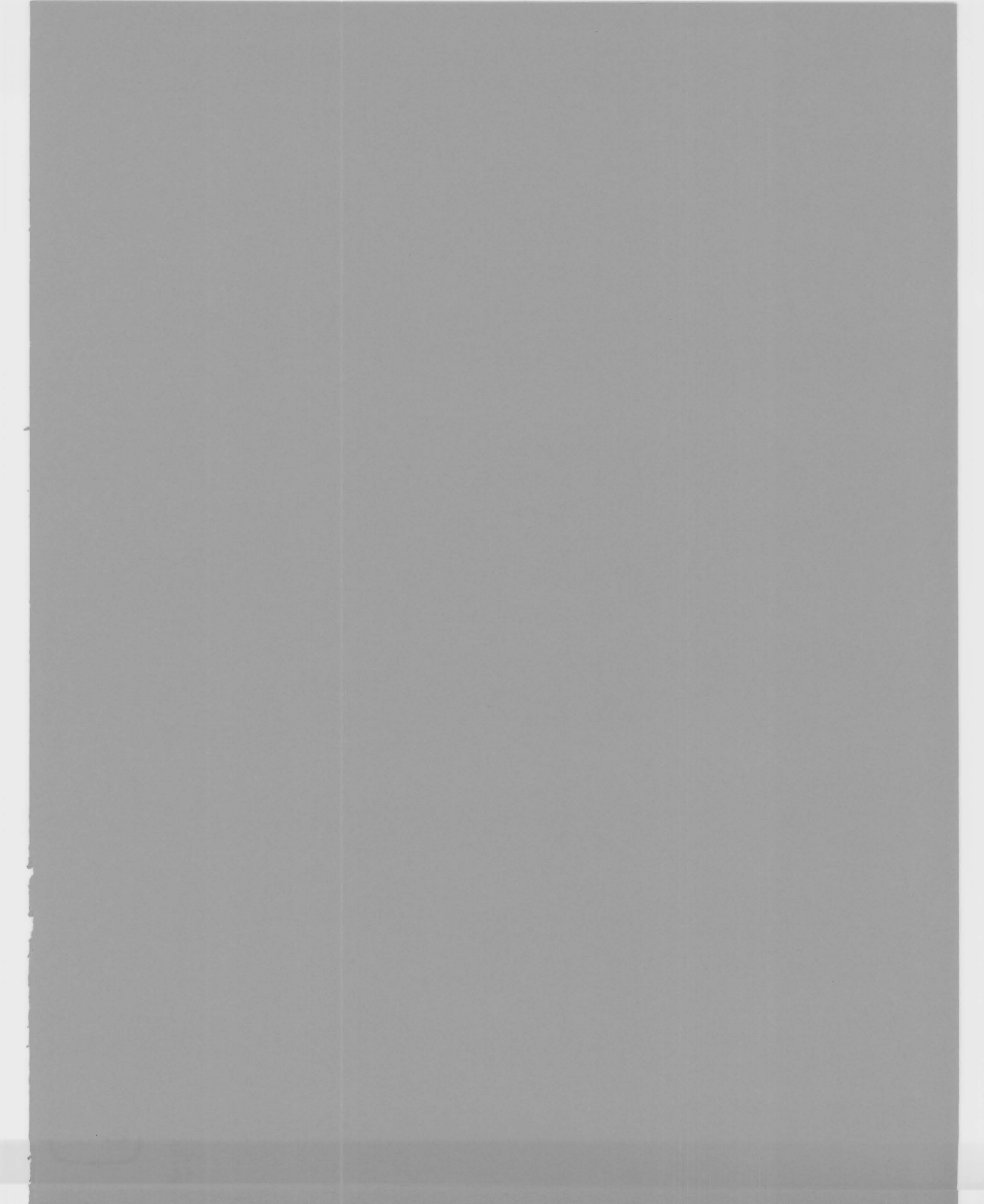
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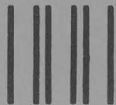




DEPARTMENT OF HEALTH AND HUMAN SERVICES  
PUBLIC HEALTH SERVICE  
CENTERS FOR DISEASE CONTROL  
NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH  
ROBERT A. TAFT LABORATORIES  
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