



## Training Course Accreditation Form WASAC

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E-mail: [support@wasac.academy](mailto:support@wasac.academy)

Please type or print legibly. Provide all information requested. Fill out separate Form for each product.

Return the Form to WASAC online or via e-mail

Organization's Name	Organization's Address, Phone No.& E-mail
Applicant's Name:	Applicant's Address, Phone No.& E-mail

HSE Course Title	Duration of training the Course	Method of delivery (In person, Online, Distance Training)

List Present Safety Certification(s) of Trainer (if any)

Applicant's Signature _____	Date: _____
Trainer Signature _____	Date: _____