

**CSTI Hazardous Materials Proof of Technician or Specialist**  
**SUBMIT FOR EACH COURSE REQUIRING Technician or Specialist**  
**AS A PREREQUISITE**

Course Title: \_\_\_\_\_

Course Date: \_\_\_\_\_

CSTI Class Number: \_\_\_\_\_

Course Manager: \_\_\_\_\_

This memo is to verify that all participants of the California Specialized Training Institute's Hazardous Materials Course Type and Number (listed above) taught by outreach course manager (listed above) have successfully completed **Hazardous Materials Technician, or Hazardous Materials Specialist** as specified in California Code of Regulations, Title 19, Division 2, Chapter 1, Subchapter 2, Section 2540 m (1), prior to attending the course number referenced above.

I understand that at any time, the California Specialized Training Institute may audit my course, and ask me to provide documentation of Hazardous Materials Technician or Hazardous Materials Specialist training as referenced in the California Code of Regulations Section 2540 m (1) for the above listed course participants.

\_\_\_\_\_  
(Signature of Course Manager)

**NOTE: Please submit only this form. Copies of Technician or Specialist competency certificates are to be filed by the Course Manager, and not submitted to C.S.T.I. unless requested in an audit.**