

DEPARTMENT OF LAW AND PUBLIC SAFETY DIVISION OF STATE POLICE

Hazardous Materials Response Unit

1001 Fire Academy Drive Sayreville, NJ 08872



Homeland Security Branch - Special Operations Section Technical Response Bureau

TRAINING ANNOUCEMENT

The NJSP HMRU announces the following Hazardous Materials Training Courses

CARGO TANK Vehicle Specialty Course (2 days)

LEVEL 4 CARGO TANK TRUCK SPECIALITY 06063 16 HOURS This course is designed and intended for those Haz-Mat Team members who respond to releases or potential releases of hazardous materials from cargo tank trucks for the purpose of controlling the release. The goal of this program is to provide the responder with the knowledge and skills necessary to analyze an incident involving a cargo tank truck, to plan a response within the capabilities and competencies of available personnel and equipment, and to implement the planned response to mitigate the hazardous materials incident. *Prerequisite:* Haz-Mat Technician.

This course will be offered at the following locations

June 4 & 5, 2012 (Mon& Tues) Camden County Fire Academy 08001600 hrs. each day

June 6 & 7, 2012 (Wed.& Thurs) Passaic County Fire Academy 08001600 hrs. each day

June 8 & 9, 2012 (Fri & Sat) Middlesex County Fire Academy 08001600 hrs. each day

All applications are to be directed to NJSP HMRU by Thursday, May 24, 2012

NJSP HMRU will confirm via email application status and acceptance.

THERE IS NO COST TO THESE COURSES

Application form is attached.

Questions shall be addressed to NJSP HMRU

NJSP HMR 1001 Fire Academy drive Sayreville, NJ. 08872 LPPCASHT@gw.NJSP.org



New Jersey State Police Hazardous Materials Response Unit Specialty Training Application



PRINT CLEARLY ALL REQUESTED INFORMATION

	ch -Specialist Application	Ver	05	March 1, 2012	
Middlesex County Fire Academy 1001 Fire Academy Drive Sayreville, NJ 08872 Fax # (732) 721-4672		Mail or fax applications to the Naddress/number to the left For further info. contact the HA (732) 721-4040 LPPFitzm@GW.NJSP.ORG	ZMAT Response Unit at		
Name & Title of Supervisor (print)		Supervisor S		Date	
Name o Tit					
		uring the length of the pro-		rance and/or other department iability for any injuries that are	
	Applicant has attended the pre-requisite training courses and has indicated above the dates of attendance for HM Awareness and Operations, and has completed IMS 10- & 200. training programs				
	Applicant is believed to be in good health and physical condition and is able to perform all of the required hands-on activities.				
	Applicant has apparatus.	as successfully completed	recognized training in the u	se of self contained breathing	
	department.	•		ergency Response within the	
The individual named in Part 1 above is requesting to attend a HazMat./Specialty training course offered by the NJSP-HAZMAT Response Unit. I as Supervisor/Department Head have verified that at a minimum, the following requirements have been met:					
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Class You are applying for: Date of Course					
PART 2	Indicate the specific class you wish to attend, include specific dates Mark all pre-requisites as required. Submission of this application does not guarantee admission into the course. YOU WILL RECEIVE WRITTEN CONFIRMATION PRIOR TO START OF CLASS.				
E-Mail	Indicate the enecifie	place you wish to ottend includ	so print neatly		
FAX#	()		S.S. #	to confirm your attendance,	
TOWN		STATE	ZIP CODE		
MAILING ADDRESS			HOME PH #	_()	
DEPT.			WORK PH #	()	
PART 1 NAME			Police, EMS, Fire, Health, etc TYPE OF AGENCY		