

ASBESTOS TRAINING INSTRUCTOR REFERENCE FORM

Directions: Type or print all requested information in the spaces below and sign where indicated. Each instructor application shall include three professional references attesting to teaching experience and asbestos-related qualifications in accordance with 25 TAC 295.55 (f)(2). This form must be filled out completely by the individual providing a reference and mailed directly to the attention of: Asbestos Trainer Licensing, Environmental & Sanitation Licensing Group, Department of State Health Services, 1100 West 49th Street, Austin, Texas, 78756.

Note: No more than one reference will be accepted from a	n employee of the	same company as the instruc	tor.
I am providing the following reference for			_ who is
requesting approval from TDH as an Asbestos Training II	nstructor to instru	ct Asbestos courses for	(name
of training provider). I have known this individual for	year(s)	month(s). The nature of my	
relationship to this individual is as a		. I can attest to the teaching	
experience and qualification of this individual as follows:			
I certify that the above statements are correct, complete, a this reference will be fully verified by me, if so requested Services and I understand that I may be contacted at my en number.	by a representati	ve of the Department of State	e Health
My professional title is:			
My Employer's name:			
Employer's address:			
Signature:	Date: _		
Employer's phone number: ()		a code)	
Home phone number: ()(incl	ude area code).		