

# SAFETY, HEALTH & ENVIRONMENTAL PROFESSIONAL (SHEP) CERTIFICATE REQUEST FORM



## FOR OFFICE USE ONLY

STUDENT ID: \_\_\_\_\_

- PLAQUE     PAPER  
 SHIP         PRESENT

### Application Information:

Recipients will be provided with both a hard and an electronic certificate of their certification after completion.

**Status of Processing:** Certificate request forms will be processed within ten business dates of receipt. If you do not receive a receipt of confirmation within this time frame, contact our office. All certification credentials will be shipped via FedEx with signature release unless otherwise requested.

**If you have not completed your certification requirements:** Participants applying for their certification prior to completing requirements will be presented with their certification in their final class. Certificate request form must be submitted no later than close of business two Friday's prior to your last class and no earlier than four weeks prior. All coursework must be completed other than the final class before application submittal. If the participant reschedules their last class, they are responsible for notifying our office and paying a \$35 rescheduling fee.

**If you have completed all of your certification requirements:** Credentials will be sent to the address provided on page 2.

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### Recipient Information

*Note: Enter name as it will appear on certification credentials.*

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First Name	MI	Last Name	Suffix	Date of Request
Mailing Address		City	State	Zip
Phone Number		Email Address		

- I would like to be included in the UT Arlington Safety & Health Program's electronic newsletter.

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## Certification Requirements:

A copy of each course completion certificate or transcript is required for coursework not completed through the UT Arlington OSHA Training Institute Education Center. A minimum of two classes must have been completed through UT Arlington.

## Required Courses (2):

- ETI 101      *Introduction to Environmental Compliance and Management*
- RM 101      *Safety, Health, and Environmental Risk Management (SHERM) Principles*

## Additional Requirements (1):

- Certified Safety & Health Official (CSHO) in General Industry or Construction  
–Requires 1 Environmental elective
- OSHA #501    *Trainer Course in OSHA Standards for General Industry, or*  
OSHA #500    *Trainer Course in OSHA Standards for Construction*  
–Requires 4 Safety & Health electives and 1 Environmental elective

## Safety and Health Electives (4):

### Note: Safety & Health electives are not required with your CSHO

- OSHA #521    *OSHA Guide to Industrial Hygiene*
- OSHA #2015   *Hazardous Materials*
- OSHA #2055   *Cranes in Construction*
- OSHA #2045   *Machinery and Machine Guarding Standards*
- OSHA #2225   *Respiratory Protection*
- OSHA #2255   *Principle of Ergonomics*
- OSHA #2264   *Permit-Required Confined Space Entry*
- OSHA #3015   *Excavation, Trenching and Soil Mechanics*
- OSHA #3095   *Electrical Standards*
- OSHA #3115   *Fall Protection*
- OSHA #5810   *Hazards Recognition for On-Shore Oil & Gas Exploration and Production*
- OSHA #3085   *Principles of Scaffolding, or*  
SH 300 Safety Standards for Scaffolding

## Environmental Electives (1):

- AIR 201      *Fundamentals of Clean Air Act*
- WST 301      *Introduction to Water and Wastewater Regulations*
- WST 401      *Resource Conservation Recovery Act*
- ETI 501      *EPA Outreach Trainer Course*
- MGE 802      *Pollution Prevention and Lean Principles Workshop*
- MGE 810      *Environmental Audits*
- MGE 801      *Environmental Management Systems (EMS)*
- MGE 811      *Environmental Law*

# SAFETY, HEALTH & ENVIRONMENTAL PROFESSIONAL (SHEP) CERTIFICATE REQUEST FORM



Item	Unit Price	Quantity	Price
Application Fee <i>Includes paper/PDF certificate</i>	\$75	1	\$75
Certification Plaque	\$125		
<i>Subtotal:</i>			
<i>Total:</i>			

**Submit in person or by mail to:**

The University of Texas at Arlington  
Division for Enterprise Development  
140 W. Mitchell, Arlington, TX 76019  
M: 817-272-2581 | F: 817-272-2556  
[cedregistration@uta.edu](mailto:cedregistration@uta.edu)

**Shipping Information**

Last Name	First Name	MI	Date of Request
Mailing Address <i>Note: Cannot be P.O. Box</i>		City	State
Phone Number		Email Address	

**Payment Information**

**Charge to:**     Visa     Master Card     Discover     American Express

Card Number	Expiration Date
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Name on Card

Authorized Signature

**Office Use Only**

Date Received: \_\_\_\_\_ Verified By: \_\_\_\_\_ Payment Taken By: \_\_\_\_\_

Course Number: \_\_\_\_\_ (Present Only) Course Dates: \_\_\_\_\_ (Present Only)

Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Program Use Only**

Date Recieved: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Payment Verified by: \_\_\_\_\_