

# OSHA #7210 Pandemic Illness Preparedness

**February 8, 2021 | Manchester NH**

**March 9, 2021 | ONLINE**

**Days: 1 | Credits: 0.6 CEUs | \$265**

**[REGISTER NOW CLICK HERE!](#)**

(or complete the attached registration form)

## Course Description:

This course covers recognition of hazards and risks associated with a pandemic illness event and development of strategies to assist a business, community, or family with realistic preparation for a pandemic event. Course topics include potential impact of a pandemic illness event on a business and community, critical elements of a preparedness plan, and realistic strategies for supporting continuity of operations. This course offers information on strategies that can be used to control the spread of the illness, minimization of exposure to employees and family, and resources available from OSHA and other government agencies. For more information visit: <https://oshaedne.com/osha-7210/>

## Instructor: John Suiter



John brings significant health, safety, and environmental compliance knowledge to the OTI Education Center from his current position with the Environmental Protection Agency. As Health and Safety Manager for Region 1 EPA, he oversees EPA New England's regional environmental, health and safety program which includes broad spectrum responsibilities and leadership including planning, implementing, and conducting detailed and/or complex surveys and evaluations of work sites as well as implementation of health and safety program plans and Environmental Management Systems (EMS)

John is connected regionally and nationally to key scientists and regulatory agencies responsible for leading pandemic safety and health solutions. John's involvement establishing the Job Hazard Analysis Program (JHA) and site safety plans for the region, plus adequate protection for workers, creates a dynamic synergy for discussing how pandemic illness preparation can effectively be administered and controlled as one of many occupational stressors. As lead instructor for OSHA's #7210 Pandemic Illness Preparedness course, everyone benefits from John's depth of knowledge and engaging conversations on the topic.

# COURSE REGISTRATION FORM

FAX to: 603-645-0080 • Scan & email: [oshaed@keene.edu](mailto:oshaed@keene.edu)  
 Mail to: OSHA Training Institute Education Center  
 1050 Perimeter Rd., Suite 202, Manchester, NH 03103

OSHA  SGE  Group



TODAY'S DATE: \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_

MO DAY YR MO DAY YR MI SUFFIX

MO DAY YR MO DAY YR MI SUFFIX

LEGAL NAME: \_\_\_\_\_ LAST FIRST MI SUFFIX

*as it appears on Valid Gov't ID*

COMPANY NAME: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

STREET / RFD / BOX \_\_\_\_\_

CITY / TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PERMANENT (HOME) ADDRESS: \_\_\_\_\_

STREET / RFD / BOX \_\_\_\_\_

CITY / TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

WORK PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ FAX NUMBER \_\_\_\_\_ HOME PHONE \_\_\_\_\_

PERSONAL EMAIL ADDRESS \_\_\_\_\_ BUSINESS EMAIL ADDRESS \_\_\_\_\_

**Note to Student Registering:** Provision of email and telephone contact information implies consent to be contacted for registration, attendance and transcript records use, and future communication for announcements and updates. Data collected for registration is confidential and is not publically released, rented or sold. **I wish to further restrict information** Initial here: \_\_\_\_\_

## Check Appropriate Boxes

Resident of N.H.  Not a resident of N.H.  
**GENDER:**  Male  Female  
**U.S. CITIZEN:**  Yes  No  
 If "No", currently a citizen of: \_\_\_\_\_

### ETHNICITY:

What is your racial background?

- American Indian/Alaskan Native
- Black, Non-Hispanic Origin
- Asian/Pacific Island
- Hispanic
- White, Non-Hispanic Origin
- Other \_\_\_\_\_

I certify that to the best of my knowledge the information herein is correct and complete.

My signature on this form confirms that, should my employer default on this agreement. I am responsible for any and all charges incurred by Keene State College, including any additional collection costs associated with the satisfactory conclusion of this debt.

**X** \_\_\_\_\_  
 Student Signature

COURSE NUMBER	COURSE TITLE	START DATE	END DATE	LOCATION	TUITION
NON-CREDIT COURSES					COURSE 1 TUITION
					COURSE 2 TUITION
					LATE FEE* \$25.00
					NET BALANCE DUE

**\* LATE REGISTRATION FEE:** A late fee of \$25 will be assessed to cover administrative expenses, if registration is within 5 business days of the course start date.

[Terms and Conditions of registration can be found at OSHAedNE.com \(located with the Registration Forms\).](#)

## Payment Information:

**Confirmation will be emailed to the individual registering, unless otherwise informed.**

**PURCHASE ORDERS OR CHECKS:**  
 Please make checks or purchase orders payable to: **Keene State College.**  
 Enclosed is my check or purchase order for \$ \_\_\_\_\_  
 Purchase order number and/or check number \_\_\_\_\_

**Purchase order MUST accompany registration**

Account # SPECIFY:  VISA  MasterCard  Discover CVV # \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Charge \$ \_\_\_\_\_ to my credit card.

PRINT Cardholder Name \_\_\_\_\_  
 Cardholder's Signature (I have authorized credit card payment.) \_\_\_\_\_  
 Cardholder's Billing Address if different from above \_\_\_\_\_

