



PEC / Premier Safety Management, Inc.
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SafeGulf Orientation Instructor Application

COMPANY INFORMATION		
COMPANY NAME (Must be a SafeGulf Member in Good Standing):		
ADDRESS:		
CITY:	STATE:	ZIPCODE:
COMPANY PHONE:	COMPANY FAX:	
WEBSITE:		

INSTRUCTOR INFORMATION			
INSTRUCTOR NAME:		JOB TITLE:	
HOME PHONE:	DATE OF BIRTH:	SOCIAL SECURITY NUMBER:	
EYE COLOR:	EYE COLOR:	WEIGHT:	HEIGHT:

Provide employment history in safety and training. Include certification and areas of expertise. Describe briefly below and attach current resume.

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In which of the following industries does your company work? (Check all that apply.)

- _____ Oil & Gas – Onshore
- _____ Oil & Gas – Offshore
- _____ Refineries and/or Chemical Plants

 SIGNATURE:

_____/_____/_____
 DATE:

Your signature on this form indicates that you have read and are in agreement with the SafeGulf Accreditation Requirements as documented on the SafeGulf website at the link below:
<http://www.safegulfweb.com/files/AccreditationRequirements.pdf>

All Instructors must include a photograph for their ID card. Please send a photo or a disc with picture in .jpeg or .bmp format. The photo must be a head shot without hat or sunglasses. Photos with hats or sunglasses will be rejected.