



The US Department of Transportation's, [Transportation Safety Institute](#), will be conducting a Motor Carrier Safety Compliance, Transportation of Hazardous Materials by Ground (49 CFR) and Air (IATA) classes in Anchorage, AK.

U.S. DOT MC Safety Compliance (4.5 days)

Cost: \$750 April 23-27, 2012

Course Topics:

- Part 380 – Special Training Requirements
- Part 382 – Controlled Substances/Alcohol Testing
- Part 383 – CDL Requirements
- Part 385 - Safety Fitness Program
- Part 387 – Financial Responsibility
- Part 390 – Applicability
- Part 391 – Qualification of Drivers
- Part 392 – Driving of Motor Vehicles
- Part 393 – Parts & Access./Out-of-Service Criteria
- Part 395 – Hours of Service/Auditing
- Part 396 – Inspection, Repair, Maintenance

Transportation of HazMat (3 Days)

Cost: \$650 April 30-May 2, 2012

This multimodal course provides a basic working knowledge of the hazmat regulations contained in 49 CFR.

Air Transportation of HazMat (2 Days)

Cost: \$600 May 3-4, 2012

This course concentrates on the requirements and standards of ICAO/IATA and applicable parts of 49 CFR.

35 seats available for each class.

Register online at:

<https://www.tsi.dot.gov/tsilms/userpr ofilecreate.aspx>

-or-

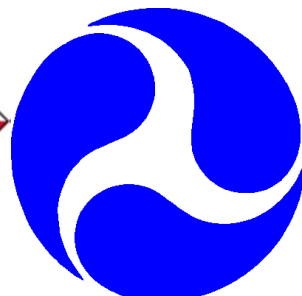
Fill out the attached registration form and fax to 405-954-4645.

Classes will be held at:

Environmental Management, Inc.
206 E. Fireweed Ln., Suite 201
Anchorage, AK 99503

All our courses can be delivered on-site at your facility and customized to fit your needs. Call [Eddie Scott](#) at 405-954-4500 to discuss course delivery costs and available dates.

Classes are subject to cancellation should minimum number of student enrollments fail to be met.



**REGISTRATION INFORMATION – Anchorage, AK classes only
(one registration per student)**

Name: _____

E-mail: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Course Title: _____

Class Dates: _____

Check (payable to Transportation Safety Institute).

Please charge my credit card:



Amount: _____

Card No: _____

Exp Date: _____ Sec. Code _____

Card Holder's Name *(Please print)*

Signature of Card Holder

Billing Address: _____

Phone: (405) 954-4500

Fax: (405) 954-4645

*Classes are subject to cancellation should min. number of student enrollments fail to be met.