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| **DEPARTMENT OF HEALTH SERVICES**  Division of Public Health  F-03295A (07/2024) | **STATE OF WISCONSIN**  Wis. Admin Code ch.159  Page 1 of 1 | | |
| **ASBESTOS RECORDKEEPING DESCRIPTION** | | | |
| **Instructions:** Complete this form to describe your recordkeeping description under [DHS 159.24(5)(c)](https://docs.legis.wisconsin.gov/document/administrativecode/DHS%20159.24(5)(c)) and include it with your application for asbestos course accreditation. | | | |
| Training Manager Name (Last, First, MI)  Click or tap here to enter text. | | | |
| Training Company Name  Click or tap here to enter text. | | | |
| Date of Submission or Last Received  Click or tap here to enter text. | | | |
| **Training Course Description** | | | **Course Type** |
| Asbestos Supervisor  Asbestos Worker  Asbestos Inspector   Asbestos Management Planner  Asbestos Project Designer   Exterior Asbestos Supervisor  Exterior Asbestos Worker | | | Initial  Refresher |
| **Records to be Kept Under Sec.** [**DHS 159.19(7)(b)**](https://docs.legis.wisconsin.gov/document/administrativecode/DHS%20159.19(7)(b)) | | | |
| Click or tap here to enter text.  Example Description: Records to be kept will include:   1. The original certificate of course accreditation from the department 2. Copies of the following department approved course materials    1. Approved course curriculum    2. Instructor manual    3. Student manual    4. Course agenda    5. Blank course test    6. Printed and audiovisual materials used    7. Any other material submitted as part of the application for accreditation and any documents reflecting later changes made to an accredited course 3. For each class conducted, the course test questions, answer key, date the test was administered, discipline of the training course, name of the person who administered the test, names of students who completed the test, and the scored test or answer sheet for each student including passing and failing tests. 4. A copy of each student's training certificate. 5. Class and student information required under s. [DHS 159.22 (18)](https://docs.legis.wisconsin.gov/code/admin_code/dhs/110/159/iii/22/18). 6. Copies of the photographs required under s. [DHS 159.22 (7)(d)](https://docs.legis.wisconsin.gov/code/admin_code/dhs/110/159/iii/22/7/d) 7. Original class attendance student sign in records. 8. Documentation of principal instructor and guest instructor qualifications, including copies of principal instructor approvals. 9. The quality control plan required under s. [DHS 159.22 (5)](https://docs.legis.wisconsin.gov/code/admin_code/dhs/110/159/iii/22/5)  including documentation of activities conducted in compliance with the quality control plan. | | | |
| **Record Location Under Sec.** [**DHS 159.24(5)(c)2**](https://docs.legis.wisconsin.gov/code/admin_code/dhs/110/159/iv/24/5/c/2) | | | |
| **Example Description:** Records will be stored at our facility in 1234 Any Street, Anycity, WI. Normal business hours for this facility are 8:00 am to 6:30 pm, Monday through Friday, excluding state and federal holidays. Records will be given to the department upon request.  In state trainers and trainings, records should be kept at the principal place of business in Wisconsin. Out of state trainers and trainings, records should be kept at an office location closest to Wisconsin. | | | |
| **Retention Period Under Sec.** [**DHS 159.24(5)(c)1**](https://docs.legis.wisconsin.gov/code/admin_code/dhs/110/159/iv/24/5/c/1) | | | |
| **Example Description:** As an asbestos training provider, I shall retain all records related to asbestos training activities for at least 3 years after the documents are created or received. I will retain curriculum materials for at least 3 years after the materials are no longer used. | | | |
| **SIGNATURE** — Training Manager | | **Date Signed**  Click or tap to enter a date. | |