

**Personal Protective Equipment (PPE) Eligibility Form -
Resident Course - (Nevada Site)
Response to Rad/Nuc WMD Incident Course (PER-354)**

SECTION 1:

Training Applicant Printed Name: **FEMA SID:**

To complete the Counter-Terrorism Operation Support (CTOS) course(s), students may participate in training exercises that include the use of Personal Protective Equipment (PPE)*. All training candidates for the below listed courses **must** complete this form to ensure all students are deemed eligible to use the provided PPE. * **PPE Includes boots, suits, gloves and air purifying respirators.**

Course Requested:

Select Scheduled Course Start Date:

SECTION 2:

Training Applicant: By signing this form, I affirm that I have been medically cleared by my agency to don and doff PPE and respiratory protection in accordance with Occupational Safety and Health Standards 1910 Subpart I, Personal Protective Equipment and 1910.134, Respiratory Protection.

Training Applicant Signature: **Date Signed:**

SECTION 3:

Training Applicant Supervisor: By signing this form, I affirm that the above candidate has been medically cleared by my agency to don and doff PPE and respiratory protection in accordance with Occupational Safety and Health Standards 1910 Subpart I, Personal Protective Equipment and 1910.134, Respiratory Protection.

Training Applicant Supervisor Printed Name: **Title:**

Training Applicant Supervisor Signature: **Date Signed:**

SECTION 4:

Please provide the REQUIRED information to ensure proper fit for PPE:

Choose suit size based on Chart below:

Shoe Size: **Level C Hazmat Suit Size:**

HEIGHT	6'8"									
	6'6"									XXXL
	6'4"									
	6'2"									XXL
	6'0"									
	5'10"									XL
	5'8"									
	5'6"									L
		170	190	210	230	250	270	290		
		WEIGHT								

Forward completed PPE Eligibility Form along with the CTOS Student Registration Form to:

ctosreg@nv.doe.gov

For more information about these courses visit:

http://ctosnnsa.org/pages/courses/courses_resident.htm