

# **Arizona State Mine Inspector** 1700 W. Washington Street, Suite 403 Phoenix, AZ 85007

Office: 602-542-5971 Fax: 602-542-5335

### **Private**

## PLEASE TYPE IN ALL DATA

For information on Mine Safety and Health Administration (MSHA) training classes see Arizona State Mine Inspector (ASMI) web site at www.asmi.az.gov or call 602-542-5971. For information on program guidelines, fees, cancellation and refund policies see: E&T Fees & Policies Document.

To request a company private class, please submit request form two (2) months in advance or sooner, fill out all pertinent information, class location and number of participants. Keep in mind that you must have a minimum of 15 students for a private class at your designated location.

ASMI conducts separate 8 hour Annual Refresher and 24 hour New Miner Inexperience sessions. Per MSHA / ASMI guidelines Annual Refresher sessions are booked to a minimum of 15 students and a maximum of 35. New Miner sessions are booked to a minimum of 15 students and a maximum of 25.

NOTE: The Education and Training fees are dependent on the Federal MSHA grant allocation. Current fee rates cannot be guaranteed for future classes.

#### Please submit a new form for each class.

The Education and Training department will contact you with confirmation on the date you have requested

and/or other available class date(s).	t will contact you with commination o	in the date you have requested
Requested training dates for private	class:	or
<b>NOTE:</b> Private classes for Part 48/46 guidelines must be met. Contact Frank	<u> •</u>	· • • • • • • • • • • • • • • • • • • •
Company Information:		
Name:		
Contact Person:		
Mailing Address:		
City State	Zip Code	
Training Location	Time	
Phone # Fax #	Email	
MSHA ID#	STATE ID#	
☐ Metal ☐ Aggre ☐ Surface ☐ Under	egate Coal rground Contractor	Other
Number of Employees:	<u></u>	

Type o	of Training R	equested – P	rivate AR or NMI	:					
	Part 48 AR	Annual Refre	sher	\$	5	450.00	8	Hours	
	Part 48 AR	Annual Refre	sher Underground	\$	5	450.00	8	Hours	
	Part 48 AR	Annual Refre	sher Coal	\$	5	450.00	8	Hours	
	Part 46 AR	Annual Refre	sher	\$	,	450.00	8	Hours	
	Part 48 NMI	New Miner w	/detailed Mine Type:	s and Issues \$	5 9	900.00	24	Hours	
	Part 46 NMI	New Miner w	/detailed Mine Type:	s and Issues \$	5 9	900.00	24	Hours	
	Basic FA/CPR	/BBP		\$	\$	225.00	6	Hours	
	Approved Part	46 Training P	lan Submitted to the	Arizona State 1	M	line Inspector (	Offi	<u>ce</u>	
Registr	ation Fees:			Ţ					7
		Training	Class			Number of Students		Cost	
Annual	Refresher								
subject FA/CPI First Ai 3 of NN	matter, detailed R/BBP.	l mine types ar - ONLY availa	24 hour with required and issues plus health in the able to company empty.  n ONLY.	ssues and					-
Paymer	nt must be recei	ved 2 weeks p	rior to the date of the	class.		Γotal Amount Due			
Pursuant of any ki	to A.R.S. § 13-3102	!, all participants a on of a weapon,	be enforcing the following re hereby notified that the when attempting to enter in of such weapon.	y prohibited from	er	ntering or attending			
Paymen	t Type:								
	$\overline{}$	Money Order / ase Order (mai	Cashier Check / Corl with form) #		Pa	yable to: Ariz		•	ctor
Credit (	Card:	_							
C1 N	Visa Visa		MasterCard		A	American Ex	pre	ess	
	Number:								
	tion Date:								
Securi	ty Code:								
Name	on Credit Ca	rd:							
Cardh	older Signatu	ire:							

#### Card Holder Authorization:

I agree to pay the above total amount according to card issuer agreement.

#### **Cancellation/Refund Policy**

Payment must be received prior to the start of class. Payment can be made in the form of a money order and/or cashiers check made payable to Arizona State Mine Inspector (ASMI); MasterCard, Visa and American Express also accepted. Cancellations and/or reschedules must be requested in writing 10 days prior to the start of the class. Registrants who fail to cancel will be classified as a "no show" and will forfeit the entire registration fee. Participants must be present for the entire Annual Refresher (8-hours) and/or (24-hours) to receive Certificate of Training MSHA Form 5000-23. Note: Personal Checks will not be accepted.

For Office Use Only	<b>Instructor:</b>	
Class Date:	<b>Class Location</b>	

## **Registration Information:**

Last Name   First Name   Type of Training Required   Approximate date of Last Training	
1.       2.         3.       4.         4.       5.         6.       7.         8.       9.         10.       11.         12.       13.         14.       15.         16.       17.         18.       19.         20.       19.	re 
3.       4.         5.       6.         7.       8.         9.       9.         10.       11.         12.       13.         13.       14.         15.       16.         17.       18.         19.       20.	
4.         5.         6.         7.         8.         9.         10.         11.         12.         13.         14.         15.         16.         17.         18.         19.         20.	
5.         6.         7.         8.         9.         10.         11.         12.         13.         14.         15.         16.         17.         18.         19.         20.	
6.       7.         8.       9.         10.       11.         12.       13.         13.       14.         15.       16.         17.       18.         19.       20.	
7.       8.         9.       9.         10.       11.         12.       12.         13.       14.         15.       16.         17.       18.         19.       20.	
8.       9.         10.       11.         11.       12.         13.       14.         15.       16.         17.       18.         19.       20.	
9.         10.         11.         12.         13.         14.         15.         16.         17.         18.         19.         20.	
10.       11.         11.       12.         13.       14.         15.       16.         17.       18.         19.       20.	
11.       12.         13.       14.         15.       16.         17.       18.         19.       20.	
12.         13.         14.         15.         16.         17.         18.         19.         20.	
13.         14.         15.         16.         17.         18.         19.         20.	
14.	
15.         16.         17.         18.         19.         20.	
16.       17.       18.       19.       20.	
17.       18.       19.       20.	
18.       19.       20.	
19.       20.	
20.	
21.	
22.	
23.	
24.	
25.	
26.	
27.	
28.	
29.	-
30.	
31.	
32.	
33.	
34.	
35.	