

Build Safe NJ Group Resources

Return to Benito Labrador

blabrador@njlaborers.org

Name _____

Employer _____

Township/City of residence _____

Contact Phone #(s) _____

Classes You are Qualified to Teach: (OSHA Outreach Trainer, First Aid/CPR/AED, Flagger, etc., if you can teach an OSHA 10/30 which part(s) would you prefer to teach & how long have you been teaching the subject? Please indicate next to class.
