					Center for Risk Management		
College of the Mainland.	Co	ntinuing Education	Registi	ration	La M Phone:	20 Delany 1 arque TX 7 #: 409-933	7568 -8365
Name (Last		First	Mie	Fax #: 409-933-8027 liddle Initial) E-mail: riskmanagement@com.edu			
CHECK ONE: 1. Do you consider yourself to be Hispanic/Latino?	Mailing Ac	ddress		City		Sta	te
Yes No	Zip Student ID # or SS #		Date of Birth Sex		Home Phone		
 In addition, please select one or more of the following racial categories to describe yourself: American Indian or Alaskan Native Asian 		Cell Phone E-Mail Address					
Black or African American Native Hawaiian or Pacific Islander White	Hitchcock, S	rtify that I AM AM NOT esident of College of the Mainland I anta Fe, (including Algoa, Arcadia	District, you r		the following s	chool distr	
Course #	Signature	Course Name		Instructor	Date	Cost	CEQ
SAFE-9621-OSHT-1071-113IN		Workplace Violence and the Aftermath		J. Cherry	9/11/20 & 9/18/20	No-Cost	120
SAFE-9622-OSHT-1071-114IN		Are We Speaking the Right Language: Multicultural Consideration with our Safety Communications & Training		E. Pozniak	9/29/20 & 10/1/20	No-Cost	120