DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES

2026 Registration Form for Collaborative Safety

Safety Science Trainings

- Zoom instruction will be sent in the registration confirmation email.
- If registering more than one person, please register each person separately.

REQUIRED REGISTRATION INFORMATION

NAME _____ TITLE _____

EMAIL _____ PHONE _____

(Registrant will receive email confirmation and training materials at this email.)

ORGANIZATION _____

SUPERVISOR NAME _____ EMAIL _____

Training Modules

Please place an "x" on the line for the training(s) you would like to attend

☐ **Safety Leadership Institute** (SLI)– August 27, 2026, 9:00 am-3:00 pm

☐ **Advanced Practical Training** (APT) – August 18-19, 2026, 9:00 am-3:00 pm

☐ **Orientation** – September 17, 2026, 1:00 pm-4:00 pm

Please advise of special needs or required accommodations: _____

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PLEASE EMAIL REGISTRATION OR ANY QUESTIONS TO: kristina.makela@mt.gov