

City of Chicago  
Department of Buildings  
**SCAFFOLDING SAFETY TRAINING COURSE  
APPLICATION**

**INSTRUCTIONS**

1. This application must be completed in its entirety, signed and filed with the Department of Buildings:

Department of Buildings  
Attn: Deputy Commissioner Hal Hutchinson  
121 N. La Salle St  
City Hall Room 906  
Chicago, IL 60602

2. Type or print legibly in blue/black ink.
3. Submit all requested documentation in a binder.

***Note: Failure to provide all requested supporting documents will delay the processing of your application.***

**SECTION I. GENERAL INFORMATION** (please print)

**Training Provider Organization Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
Street City State

Zip Code

**Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Course Title(s):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Applicant/Primary Contact:** \_\_\_\_\_  
First Last Title/Position

**Address:** \_\_\_\_\_  
Street City State

Zip Code

**Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Secondary Contact:** \_\_\_\_\_  
First Last Title/Position

**Address:** \_\_\_\_\_  
Street City State

Zip Code

**Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

## **SCAFFOLDING SAFETY TRAINING COURSE APPLICATION**

### **SECTION II. SUPPORTING DOCUMENTS REQUIRED**

**(Please provide a paper copy of information below organized in a 3-ring binder)**

1. Does the course curriculum meet current OSHA minimum standards? (circle) **YES** or **NO**  
If no, please attach brief explanation.
2. Attach this completed and signed application.
3. Attach instructor(s) name(s), qualifications and resume.
4. Attach any and all class materials including a detailed course syllabus, course description and training documents.
5. Student(s) must be provided proof of a successful course completion in the form of a photo identification card. The photo identification card must contain the (a) name of training provider; (b) completion date of the course; (c) signature of the instructor; and (d) courses successfully completed.
6. Training course provider must provide a list of students who have passed and failed the safety training course in the last four years to the Department of Buildings.

### **SECTION III. REQUIREMENTS FOR SCAFFOLDING TRAINING COURSE(S)**

The topics listed below identify the student knowledge and skills required for safe use of scaffolding. The training program curriculum submitted for training course approval must include curriculum items appropriate for scaffold safety training for suspended erectors and /or users, supported scaffold erectors and /or user. These courses must meet the following requirements:

1. Knowledge of the physical construction of scaffolds and training to identify the physical appearance of properly constructed scaffolds;
2. Training that results in the students' ability to demonstrate the proper procedures and techniques required for the assembly, inspection, access, dismounting, securing, use, movement, operation, repair, maintenance and disassembly of scaffolds and scaffold components including hardware (wire and fiber ropes, connections, anchors, tie back cables, power cables, cable clips, hooks, clamps, counterweights, safety lines, knots, hitches, blocks, levers, motors, controls, safety devices, outrigger and delta beams, guys, ties, braces, staging etc.), types and methods of riggings (reeving, suspension, startup procedures, netting etc.) and scaffold platforms and foundations;
3. Ability to identify hardware capacity and limitations;
4. Requirements of scaffold construction and design (including stirrups, platform, foundation, handrails, center iron, toe boards, wire mesh, motors, and controls);
5. Computing maximum load capacity;
6. Identification, and proper use of power cable and connectors including awareness and knowledge of the function of grounding equipment;
7. Ability to properly handle, use and store tools, materials and hazardous substances on scaffolds;
8. Demonstrate knowledge and skills in scaffold safety techniques and practices;

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9. Capability to identify the proper and intended safety use techniques of scaffolds;
10. Proficiency in the identification, correction and elimination of scaffold hazards (i.e. tripping, slipping, combustible materials, fire, chemical, obstacles, and electrocution);
11. Ability to identify dangerous situations, safety hazards and weather conditions that can affect the safe use of scaffolding;
12. Capability to select the proper types of personal protective equipment such as hard hats, gloves, goggles, respiratory and /or proper clothing that are required for safe work on scaffolds;
13. Knowledge about the types of fall protection systems and skills in the use of various fall protection systems such as full body harness, life lines, safety lines, rope grab, lanyard, shock absorbers, anchorage points, bolts, pins, wind screens etc.;
14. Knowledge of various types and construction of falling object protection systems;
15. Ability to properly secure and disassemble the hardware, anchors, common knots etc. required for the safe use of scaffolds in hazardous and non-hazardous conditions;
16. Ability to recognize, inspect for defects and hazards as well as maintain scaffolds and scaffold components, including platforms, foundations, supporting structures, hardware and ropes;
17. Capability to identify proper and prohibited work practices while using scaffolding;
18. Understanding the use of air quality monitoring to determine safe ambient air quality in the breathing zone of scaffold workers;
19. Proficiency in recognizing physical conditions that may affect the safe operations of scaffolding including lightheadedness, dehydration, fatigue, overly strenuous work etc.;
20. Understanding of the physical fitness requirements for personnel assigned to work on a scaffold including the impact of drugs, alcohol, fatigue, etc. on safe scaffold use;

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**SECTION IV. CERTIFICATION STATEMENT**

I \_\_\_\_\_ am employed by and represent \_\_\_\_\_.  
**Name of Applicant** **Training Provider Organization Name**

I hereby certify that:

- All information provided, statements made, and items attached on this application are true and correct.
- I am familiar with all laws, rules and standards applicable to safe scaffolding in the application.
- All safety training will be, or has been done in accordance with all the Chicago Municipal Code requirements, OSHA, and all applicable laws and regulations.
- Agree to maintain testing and registration records. The organization will produce such documents for inspection upon request of an authorized City official.
- Agree that I have read and agree to be bound by all terms and conditions stated in this application.

**Name of Applicant:** \_\_\_\_\_  
(Please Print) Title/Position

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**SECTION V. CHECKLIST TO BE COMPLETED BY THE DEPARTMENT OF BUILDINGS STAFF**

- Completed application (signed and dated).
- Instructor(s) name, qualifications and resumes.
- Binder with all class materials, syllabus, training documents, instructor qualifications/resumes and completed application.
- Sample copy of a photo identification card.
- List of students who have successfully completed the course within the last four years.
- Confirm courses meet OSHA minimum standards. If applicable, explanation of why the course does not meet OSHA minimum standards.

**Date Application Received:** \_\_\_\_\_

**Training Provider Organization Name:** \_\_\_\_\_

**Reviewer:** \_\_\_\_\_

**Reviewer's Recommendation:** \_\_\_\_\_

**Reviewer's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Application:** **APPROVED** **OR** **NOT APPROVED**

**Commissioner's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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