



NEW YORK STATE DIVISION OF HOMELAND SECURITY AND EMERGENCY SERVICES

THE STATE PREPAREDNESS TRAINING CENTER PRESENTS:

WMD AWARENESS TRAINING

Course: AWR – 160

April 4, 2012

8:00 AM – 5:00 PM

Location

State Preparedness Training Center
5900 Airport Road
Oriskany, NY 13424

You Will Learn About: The recognition, avoidance, isolation, and notification techniques in a weapon of mass destruction (WMD) environment.

At the conclusion of this course **You Will Be Able To:**

- Demonstrate a working knowledge of the prevention and deterrence strategy, identify indicators of potential terrorist acts and identify potential terrorist targets;
- Understand recognition, avoidance, isolation, and notification techniques of chemical agents and toxic industrial chemicals and materials in a WMD environment;
- Understand recognition, avoidance, isolation, and notification techniques of biological agents and materials in a WMD environment;
- Understand recognition, avoidance, isolation, and notification techniques of radiological and nuclear materials when used as WMD's;
- Understand recognition, avoidance, isolation, and notification techniques of explosive devices when used as WMD's

Cost:

- There is **NO FEE** for this course.
- Travel and meals are the responsibility of the course participant.
- *****Lodging will be provided on the night of April 3 & 4, 2012. You are only eligible for lodging if your residence and official work station are more than 50 miles from the training center and you are a State or Local Agency First Responder from New York (see registration form).**

○ **Lodging is NOT available for Federal Employees or Private Industry participants.**

To **REGISTER** online, go to <http://www.dhSES.ny.gov/oem/training/>
For more information, contact the DHSES, OEM, Training Section
Phone: 518-242-5003 ■ Email: training@dhSES.ny.gov

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TRAINING ANNOUNCEMENT

WMD AWARENESS TRAINING

April 4, 2012
8:00 AM – 5:00 PM

Location

State Preparedness Training Center
5900 Airport Road
Oriskany, NY 13424

You Will Benefit From:

- Lectures
- Case Studies

You Should Attend if you are: involved with emergency planning, response or recovery efforts.

Prerequisites:

- You must be a US citizen or have prior approval to take this course.
- The New York State Division of Homeland Security and Emergency Services reserves the right to determine eligibility for this course.

REGISTRATION & CONTACT INFORMATION For more information contact the New York State Division of Homeland Security and Emergency Services (DHSES), Office of Emergency Management (OEM), Training & Exercise Unit at 518-242-5003 or by email at register@dhSES.ny.gov.

This class has a capacity of **40** people. You may register either online or by faxing the application.

- Online to <http://www.dhSES.ny.gov/oem/training/> • Fax: 1-518-485-8469

No Show Policy: Failure to attend a class you have registered for can result in restriction on future course attendance and agency notification. If you have not received a confirmation or denial two weeks prior to the course date, please contact DHSES, OEM, Training Section.

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COURSE REGISTRATION (FAX) FORM
WMD AWARENESS TRAINING

AWR-160

Course: AWR – 160
April 4, 2012
8:00 am – 5:00 pm

Location
State Preparedness Training Center
5900 Airport Road
Oriskany, NY 13424

Registration form fields including: FIRST NAME, MIDDLE NAME, LAST NAME, SUFFIX (Sr./Jr./II), STUDENT ID, POSITION/TITLE, ORGANIZATION, ORGANIZATION TYPE, DEPARTMENT, WORK ADDRESS, CITY/STATE/ZIP CODE, COUNTY of EMPLOYMENT, MAILING ADDRESS, CITY/STATE/ZIP CODE, E-MAIL ADDRESS, HOME PHONE NUMBER, WORK PHONE NUMBER, CELL PHONE NUMBER, FAX NUMBER.

Participant's Signature: _____ US Citizen ___Y___N
SUPERVISOR / TRAINING OFFICER NAME _____
CONTACT NUMBER _____
SUPERVISOR'S E-MAIL ADDRESS _____

Sign only if you will need lodging ***Eligible State or local agency first responders only.
I certify that I am traveling more than 50 miles from my residence and official work station and request lodging for this training course. Lodging is NOT available for Federal Employees or Private Industry participants.

Signature _____ Date _____

Please FAX completed registration form to: (518) 485-8469

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