**Request for Dispensation**

**From: Appendix 8, NOGEPA Training Standard 001 24 June 2020**

 **(Extension to an expired safety/emergency response training certificate)**

Operating companies and contractors shouldmake all reasonable efforts to ensure that safety and emergency response related refresher training is completed before the individual’s current certificate expires. In case of unforeseen circumstances such as illness or abnormal work demands the individual may extend the currency of the current certificate by up to 3 month under the following conditions.

* The form provided in this Appendix – Request for Dispensation is completed by the Employer of the individual and handed over to the Training Provider (when applying for a training after the expiry date of former training) or¹ to dispensation@nogepa.nl (when applying for dispensation to go offshore with an expired training certificate), for consent and filing; and
* Extension will only be granted to persons who have completed the basic course and at least one related refresher course of the subject training. Extensions will not be granted to visitors or personnel who work offshore occasionally.

Where an extension is granted the effective start date of a new refresher training certificate will be the expiry date of the individual’s corresponding current certificate (back dating).

Refresher courses could also be taken from 3 months before the expiry date (no need for dispensation). The entrance date of the refresher period **could** betaken as the expiry date from the previous course (forward dating).

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

¹depending on which situation occurs first. Dispensation granted by a training provider can also be used for work offshore and vice versa.

**Request for dispensation, Example Form**

This form is be completed by the requester and submitted:

-to the Nogepa recognized Training Provider, when applying for a training after the expiry date of former training.

**OR**

-to dispensation@nogepa.nl when applying for dispensation to go offshore with an expired training certificate.

Date (dd/mm/yyyy):

|  |
| --- |
| **Request for dispensation** |
| Name of person requiring dispensation: |       |
| Date of birth: |       |
| Training course name and number: |       |
| PSL and/or Vantage number: |  |
| Current certificate expiry date: |       |
| Organisation requesting dispensation: |       |
| Requesting responsible person: |       |
| Job title: |       |
| Contact telephone number: |       |
| Contact email address: |       |
| Reason for request of dispensation: |
|       |
| Signature:(Requesting responsible person) |       | Date: |       |