

Workplace Violence Prevention



Assaults and violent acts are the third leading cause of fatal occupational injuries in the United States accounting for 16% of all work-related fatal injuries. Workplace violence costs for lost work time and wages, reduced productivity, medical costs, workers' compensation payments, and legal and security expenses are estimated to be many billions of dollars. In addition, the New Jersey Department of Health and Senior Services has recently proposed regulations for Violence Prevention in Health Care Facilities. This course provides the necessary background for organizations and companies to establish a workplace violence prevention program and take steps to minimize their risk. You learn:

- The definition and types of workplace violence
- Applicable laws
- Risk factors
- Prevention strategies
- Threat assessment techniques
- Threat response techniques
- Key elements of a workplace prevention program

Who Should Attend: business owners and administrators, human resource managers, attorneys, loss control managers, safety and health professionals and anyone who wants to learn how to address workplace violence.

Date and Time: Wednesday, October 26, 2011, 9:00 am to 5:00 pm

Location: Public Safety Academy, Room 127, 300 Oldham Road, Wayne, NJ

Fee: \$299

Course #: NBS 120 S1

Instructors:

Michael Palermo has over 20 years of law enforcement experience including instructing the FBI and other law enforcement officers on deception behavior recognition. William Thermann has over 30 years of law enforcement experience including supervision of a NJ municipality's Crime Prevention Unit and police training office.

Registration: For additional information, please contact the Passaic County Community College, Office of Continuing Education, One Broadway Boulevard, Paterson, NJ 07505-1179, telephone (973)-684-6153, ce@pccc.edu. See next page for reservation form.

Passaic County Community College Office of Continuing Education

Information: Call (973) 684-6153 or (973) 684-5782, Monday through Friday, 8:30 am – 4:30 pm.

Registration: Advanced registration and payment are required for all Continuing Education classes. Once your registration and payment are received, you are automatically enrolled and a confirmation will be sent. Plan to attend your class as scheduled! You will be notified if a class is cancelled, changed or full by telephone. A **current telephone number** is required on the registration form.

Registration by fax: Fill out the form and fax to (973) 523-6085. Submit payment with form by mail or in person.

Registration by mail: Fill out the form and mail to: **Passaic County Community College, Office of Continuing Education, One College Boulevard, Paterson, NJ 07505-1179**. Please be sure to enclose payment in the form of check or money order.

Registration by phone: Call the PCCC Continuing Education Office (973) 684-6153 during business hours and a CE representative will hold your registration for three days until we receive your check or money order.

Registration in person: The Continuing Education Office is located at the PCCC Hamilton Club Building, 32 Church Street (Corner of Church St. and Ellison St.) Paterson, NJ.

Payment: You may pay through the mail by check or money order payable to: "**Passaic County Community College.**" Write the student name, course # and last four digits of the student's SS# or student ID on the check. Credit cards (Visa, MasterCard, or Discover), and cash payments must be made in person at the Bursar's Office, PCCC, One College Blvd., Paterson.

Withdrawals and refunds: To withdraw from a short course or seminar, you must notify the Continuing Education Office in writing or in person. Refunds will be made as follows:

- With written notification received prior to the first class session -100%
- With written notification received after the first class meeting for courses or seminars that meet more than once – 50%
- No refunds after the second class meeting.
- For classes that meet for 120 hours or more, see CE brochure or contact CE office.

Cancellation Policy: The College reserves the right to cancel courses or to change dates, if necessary. Attempts will be made to notify students in the event of a change. Refunds take 4-6 weeks.

PCCC CE Registration Form

Last Name:	First Name:	MI:
Preferred Tel. #:	Secondary Tel. #:	
Street:	City:	
County:	State:	Zip:
Emergency Contact:	E-mail:	
Student ID or Social Security #:	Date of Birth:	
Employer:	Employer's Address:	
Check all that apply: <input type="checkbox"/> New <input type="checkbox"/> Returning <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer		

Course #	Course Title	Place	Start Date	Cost

Check statements which apply:

- | | |
|---|--|
| <input type="checkbox"/> Female | <input type="checkbox"/> Male |
| <input type="checkbox"/> US citizen or permanent resident | <input type="checkbox"/> Non-resident alien <input type="checkbox"/> Other |

In compliance with Title VI of the Civil Rights Act of 1964 and Title XI of the Education Amendments of 1972.

- | | | |
|---|---|--|
| Ethnicity: Please check one | <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> Non-Hispanic/Latino |
| Race: Check one or more | <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Native Hawaiian/Other Pacific Islander | <input type="checkbox"/> White |

I certify that the above information is correct and agree to the terms of the course. Note refund policy.

Student Signature _____ Date _____

For Official Use Only:

- | | |
|--|---|
| _____ Initial Person Accepting Registration | _____ Initial of Person Accepting Payment |
| <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Charge | <input type="checkbox"/> M.O. <input type="checkbox"/> Staff <input type="checkbox"/> Third Party |