



# SAFETY HOUSE, INC.

4166 Diego St., Purok #4 Mapulang Lupa, Valenzuela City, 1440

[www.safetyhouseinc.com.ph](http://www.safetyhouseinc.com.ph) Email: shi@safetyhouseinc.com.ph

Contact Nos: +632 89848674

**OSH Training Organization DOLE Accreditation No: 1030-072225-0024**

Seminar Title	SAFETY AUDITING COURSE ONLINE TRAINING
Duration	5 days (8 hours per day) 40 hours training
Date	February 2-6, 2026
Venue	Online Training via ZOOM
Seminar Fee	<p><b>P 3,571.43 VAT EXCLUSIVE → PLEASE PAY THIS AMOUNT IF VAT EXEMPT</b>  428.57 plus 12%VAT</p> <p>-----</p> <p><b>P 4, 000 VAT INCLUSIVE → PLEASE PAY THIS AMOUNT IF VATABLE</b></p> <p><b>Note: Please disregard the 12% VAT if your BIR registration is Zero-Rated VAT. Also, please furnish us a copy of your BIR Form No. 2303 or any document that will prove exemption from VAT.</b></p>
Course Content	<p>Day 1</p> <ul style="list-style-type: none"> <li>➤ Overview of Safety Program Evaluation</li> <li>➤ Leadership and Administration</li> <li>➤ Management Training</li> <li>➤ Planned Inspection</li> <li>➤ Job/Task Analysis &amp; Procedures</li> </ul> <p>Day 2</p> <ul style="list-style-type: none"> <li>➤ Program Evaluation</li> <li>➤ Job/Task Observation</li> <li>➤ Purchasing and Engineering Controls</li> <li>➤ Organizational Rules</li> </ul> <p>Day 3</p> <ul style="list-style-type: none"> <li>➤ Accident/ Incident Analysis</li> <li>➤ Hiring and Placement</li> <li>➤ Personal Protective Equipment</li> <li>➤ Health Control and Services</li> </ul> <p>Day 4</p> <ul style="list-style-type: none"> <li>➤ Group Meetings</li> <li>➤ Personal Communications</li> <li>➤ Employee Training</li> <li>➤ Accident/Incident Investigation</li> </ul> <p>Day 5</p> <ul style="list-style-type: none"> <li>➤ Records and Reports</li> <li>➤ General Promotion</li> <li>➤ Emergency Preparedness</li> <li>➤ Off the Job Safety</li> </ul>
Notes	1. Our objective is to help Safety Officers qualify and comply with the basic requirement of the Department of Labor and Employment



## SAFETY HOUSE, INC.

4166 Diego St., Purok #4 Mapulang Lupa, Valenzuela City, 1440

[www.safetyhouseinc.com.ph](http://www.safetyhouseinc.com.ph) Email: [shi@safetyhouseinc.com.ph](mailto:shi@safetyhouseinc.com.ph)

Contact Nos: +632 89848674

**OSH Training Organization DOLE Accreditation No: 1030-072225-0024**

	<p>(DOLE) in regard to training and to equip them the necessary knowledge and information that will enable them to prepare a Safety Program suitable to their operations.</p> <ol style="list-style-type: none"><li>2. This seminar is a basic requirement for Accreditation as Safety Practitioner with the DOLE</li><li>3. For reservation please cut the reservation form and send it to Safety House, Inc. via email.</li><li>4. <b>50% down payment prior to the scheduled training, balance should be settled at least on the last day of the training.</b></li><li>5. Please provide 2x2 picture for the certificate.</li></ol>
Training Requirements & Guidelines	<ol style="list-style-type: none"><li>1. We will be using ZOOM CLOUD MEETINGS for our online training</li><li>2. A stable internet connection with a minimum internet speed of 5MBPS.</li><li>3. Either a laptop or desktop with webcam.</li><li>4. SHI Personnel will test your internet connection stability after registration</li><li>5. We will give the zoom ID and Password upon approval of your registration</li><li>6. The whole training session will be recorded.</li><li>7. Participants are not allowed to turn off their camera during training sessions.</li><li>8. Please wear a proper attire during training</li></ol>



## SAFETY HOUSE, INC.

4166 Diego St., Purok #4 Mapulang Lupa, Valenzuela City, 1440

[www.safetyhouseinc.com.ph](http://www.safetyhouseinc.com.ph) Email: [shi@safetyhouseinc.com.ph](mailto:shi@safetyhouseinc.com.ph)

Contact Nos: +632 89848674

**OSH Training Organization DOLE Accreditation No: 1030-072225-0024**

### SAFETY HOUSE, INC.

#### Reservation Form

Seminar Title & Date : SAFETY AUDITING COURSE – February 2-6, 2026

<b>Participants Information:</b>	<b>Company Information:</b>
Surname:	Company:
First Name:	Company Address:
Middle Name:	Region:
Suffix:	Industry:
Age	Total Number of Workers:
Designation:	Company E-mail:
E-mail	Company Landline/Mobile:

**(PLEASE BE ADVISED THAT THE DETAILS ABOVE ARE NEEDED FOR COMPLETION OF REPORT AT OSH CENTER)**

#### Please check your preference:

Mode of Payment \_\_\_\_ GCASH \_\_\_\_ Bank Transfer \_\_\_\_ Bank Deposit

For reservation, please contact Ms. Tina Catala at the above telephone numbers or simply cut the Reservation Form and send it back to us via email. **PLEASE MAKE CHECK PAYABLE TO SAFETY HOUSE, INC.**

#### You can deposit your payment to our:

##### Metrobank Account:

Account Name: Safety House, Inc.

Account Number: 387-7-38700613-0

##### GCASH

Number: 0917-803-2619

Name: JEFFERSON M. CATALA



## SAFETY HOUSE, INC.

4166 Diego St., Purok #4 Mapulang Lupa, Valenzuela City, 1440

[www.safetyhouseinc.com.ph](http://www.safetyhouseinc.com.ph) Email: [shi@safetyhouseinc.com.ph](mailto:shi@safetyhouseinc.com.ph)

Contact Nos: +632 89848674

***OSH Training Organization DOLE Accreditation No: 1030-072225-0024***