



Construction Safety Designations

Recertification



National Construction Safety Officer (NCSO®) National Health & Safety Administrator (NHSA™)

Issued Outside of the Yukon



Submission form checklist and documentation aid

(Select one)

National Health and	d Safety Administrator	Certification Date:	
National Construct	ion Safety Officer	Certification Number:	
		Issuing Jurisdiction:	
Name:		Date:	
Mailing Address:			
Phone:	Cell:	Email:	

*NHSA™ and NCSO® recertification complete:

A. Compulsory Courses (11)	Certification Date	Documentation/Verification submitted to NSNY
Safety (Internal) Auditor Training (incl.		
certification audit)		
Leadership for Safety Excellence		
Standard First Aid (2 day)		
Yukon Legislation Awareness		
Yukon Return to Work for either large or small		
business		

Code of Ethics

The National Construction Safety Officer (NCSO®) National Health & Safety Administrator (NHSA™)

The NCSO[®]/NHSA[™] shall:

- **1.** Practice sound judgment.
- **2.** Recognize professional limitations and competencies.
- **3.** Practice the highest standards of honesty and integrity.
- **4.** Represent themselves, their qualifications, and their experience accurately.
- **5.** Promote and uphold the distinction of the safety profession.
- **6.** Avoid conflicts of interest.
- **7.** Protect confidential information and share only when legally obligated.
- **8.** Respect dignity, diversity, human rights, and employment standards.
- **9.** Continue professional growth and development.
- **10.** Support the efforts of other safety practitioners.

l,	have read, understand, and will comply with
the NSNY NCSO®/NHSA™ Code of Et	hics as written above. I realize that any breach of
the Code of Ethics may result in a fo	rmal review and subsequent suspension or
termination of my NCSO $^{\theta}$ or NHSA $^{™}$	designation.
Signature	Date