



# Independent Electrical Contractors of New England

## Breakfast Series

What Employers, Supervisors and Human Resources need to know!

IEC New England, Rocky Hill

7:30 am: Registration and Breakfast

8:00 am: Seminar for Approximately One Hour

Members: \$25 Each or Attend All 4 for \$75

Non-Members: \$40 Each or Attend All 4 for \$120

Hosted and presented by  
Dan Shlatz from

It's Our Business to Protect Yours



### Substance Abuse in the Workplace..... April 24th

- Effects of Substance Abuse on the Individual
- Effects of Substance Abuse on the Company
- How to identify Substance Abuse in the Workplace
- Actions to take when individuals are abusing on the job

### Is that *REALLY* Harassment?..... June 19th

- Define Harassment
- Different Types of Harassment
- Identify behaviors that can be defined as Harassment
- Develop policies that prohibit Harassment in the Workplace

### Workplace Bullying & Violence..... September 18th

- Understand What Workplace Violence is and its prevalence
- Recognize types and stages of Violent Behavior
- Understand some of the Risk Factors associated with Workplace Violence
- As a Supervisor/Owner understand the steps you must take to prevent/respond to Workplace Violence

### Bonding for Jobs..... November 13th

- Why do we need Bonds
- Types of Bonds
- Functions of each Bond
- How to obtain a Bond

See the reverse side for the registration form



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### Registration is Required

You can register through our web-site, by emailing or faxing this form to us or calling the office. Please check the boxes beside each date you would like to attend.

**Members: \$25 Each or Attend All 4 for \$75**  
**Non-Members: \$40 Each or Attend All 4 for \$120**

Contact Name: \_\_\_\_\_  
Company \_\_\_\_\_ Best Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

Attendee (1) \_\_\_\_\_ Total \$ \_\_\_\_\_  
 April 24th  June 19th  September 18th  November 13  All 4 Sessions

Attendee (2) \_\_\_\_\_ Total \$ \_\_\_\_\_  
 April 24th  June 19th  September 18th  November 13  All 4 Sessions

Attendee (3) \_\_\_\_\_ Total \$ \_\_\_\_\_  
 April 24th  June 19th  September 18th  November 13  All 4 Sessions

Attendee (4) \_\_\_\_\_ Total \$ \_\_\_\_\_  
 April 24th  June 19th  September 18th  November 13  All 4 Sessions

**Payment Information (payment must accompany registration)**

Check #: \_\_\_\_\_ (payable to IEC New England) **Grand Total \$** \_\_\_\_\_  
Card Number: \_\_\_\_\_ Exp. Date (MM/YYYY) \_\_\_\_\_ Security Code \_\_\_\_\_  
Billing address: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Name as it appears on card : \_\_\_\_\_ Signature: \_\_\_\_\_

