

Public Safety Telecommunicator

Continuation Of Certification—Annual In-Service Training Report

Reporting Period: **Year 1**(Biennium Period): **2010**
 Year 2(Biennium Period): **2011**

Pursuant to DPS LEA Rule **10.29.7.9**, the listed courses are submitted in fulfillment of the **TEN (10) hour annual** in-service training requirements. (Due no later than January 15th of each year.)

Name _____
Last First Middle
Date of Birth _____ SSN _____ Gender _____

NM State Public Safety Telecommunicator Certification #: _____

Home Address: _____ City _____ State _____

Zip _____ Contact Number _____ - _____

Training Certification

I _____ hereby certify that the attached (page 2)
(Certified Public Safety Telecommunicator/Individual requesting continuation of certification)

information is true and correct and I have completed the listed courses and I have **attached as proof** of attendance my training certificate(s),

OR

a memorandum of completed training, from the Sponsoring Agency/Training Director/Instructor as proof of completion of training.

Signature _____ **Date** _____
(Submitting Public Safety Telecommunicator)

