

(attach additional sheets if necessary)

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Training Hours: NMAC Rule 10.29.7.9.C (Miscellaneous = Minimum 4 hours - see rule)				
Date Attended	Course Title	Course Hours	Location/Agency	Instructor(s)
TOTAL HOURS:				

I _____ hereby certify that the above information is true and
(Certified Telecommunicator/Individual requesting continuation of certification)

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

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

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

Registry Input by:	Certificate/Hours Verified by:	Biennium Training Processed by:
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Revised 07/2006