



Erie County Dept. of Public Safety
 Training Course Application
 for NIMS Departmental Training

45 Elm Street - Buffalo NY 14203 - 716/858-6578

**FAX COMPLETED
 APPLICATIONS TO:
 716/858-7937**
 BY THE PUBLISHED
 COURSE DEADLINE

- 1) This course application must be COMPLETED for EACH student and signed by the student's supervisor. STUDENTS MUST BE PRE-REGISTERED by the course deadline (if deadline is posted).
- 2) Applicants must notify the Public Safety Office 48-hours prior to the scheduled course start if they WILL NOT be able to attend the course requested.
- 3) The Student's Supervisor must print their name and sign each student's application.
- 4) Include the course number, the location of the course and the course title from the published training schedule.

STUDENT INFORMATION: (PLEASE PRINT ALL INFORMATION)

LAST NAME:				FIRST:				MI:		
ADDRESS:										
CITY:					ST:		ZIP:			
HOME PHONE:				WORK PHONE:				CELL:		
SOCIAL SECURITY#:										
E-MAIL ADDRESS:										

Check these boxes only if you DO NOT wish to receive training information: Via E-Mail Via Pager Via US Mail

COURSE INFORMATION: (PLEASE PRINT ALL INFORMATION)

COURSE DATE:		COURSE TITLE:							
LOCATION:									

SUPERVISOR AUTHORIZATION: (PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURE)

AGENCY NAME.:								
DATE SUBMITTED:								
PRINT SUPERVISOR'S NAME:								
SUPERVISOR'S SIGNATURE: I certify by my signature here that this applicant meets all pre-requisites and is eligible and authorized to attend this course								

Please attend the course you have applied for on the starting date indicated on the course schedule.

DATE RECEIVED: