

EMERGENCY PREPAREDNESS & RESPONSE COURSE FOR OPERATOR/RESPONDER ATTESTMENT STATEMENT

You must complete and sign to receive a certificate)																									
I attest that I have participated as noted below:																									
I am claiming (insert the number of hours that it took to complete course):																									
Gran	Grand total: (Max: 4.75)																								
Plea	Please sign your name here:																								
PAF	RTIC	IPA	NT	INF	ORI	MAT		N CERT	TIFIC	ATE	INFO	ORM/	<u>ATIO</u>	N – F	PLEA	SE P	RIN	Γ LEC	SIBLY	<u>(</u>					
Rank/Title First Name Last Name															l										
Degree																									
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	Alternate E-Mail Address																								

Mailing Address