



OUT OF STATE TRAINING REQUEST

Division of Emergency Management & Homeland Security

103 South Main Street, Waterbury, VT 05671-2101

Phone: 800-347-0488; Fax: 802-241-5615

To: Vermont State Administrative Agent Training Point of Contact

RE: Out-of-State Training Request

Date: _____

The person listed below is a member of my organization in good standing and is requesting attendance at U.S. Department of Homeland Security approved training.

Pursuant to Vermont Division of Emergency Management & Homeland Security Training Program effective January 1, 2015, I certify that:

1. The training is pertinent to their regular day-to-day functions within our organization;
2. They have not attended this or similar training within the previous 36 months;
3. That if this is a train-the-trainer course, that they will not instruct the course in Vermont until recognized as an Instructor in Good Standing by the Vermont State Administrative Agent Training Point of Contact at the Division of Emergency Management & Homeland Security.
4. If the course is Public Health or Healthcare related, I have spoken to the Vermont Department of Health (VDH) Training & Exercise Administrator and signed-off on attendance at this course.
5. If the course is Hazardous Materials Response related, I have spoken to the VT Hazardous Materials Response (HAZMAT) Chief and signed-off on attendance at this course.

Student: _____

Agency: _____

Training Course: _____

Date/Location: _____

VDH Training & Exercise Administrator Signature: _____

VT Hazardous Materials Response Chief Signature: _____

