



# ADJUNCT COURSE COMPLETION FORM



## NEW MEXICO FIREFIGHTERS TRAINING ACADEMY

PO Box 239

Socorro, New Mexico 87801

Telephone: (575) 835-7500 or In-State Toll-Free: 1-800-734-6553

FAX: (575) 835-7506

***This form must be filled out completely and returned, along with any other required paperwork, to the Fire Academy for proper documentation and issuance of certificates. Please Print or Type.***

Course Title: \_\_\_\_\_

Course Location: \_\_\_\_\_

Course Dates: Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_

Number of Students: Enrolled: \_\_\_\_\_ Completing: \_\_\_\_\_

Lead Instructor: \_\_\_\_\_

Safety Officer: \_\_\_\_\_

***The following documentation must be returned to insure documentation of this course. Please use the checklist to indicate items enclosed. Please mark N/A for those items not applicable to your course.***

- |  |                                     |
|--|-------------------------------------|
| _____ All Student Applications         | _____ Final Exam Answer Sheets      |
| _____ Course Roster (Typed or Printed) | _____ Participant Evaluation Sheets |
| _____ Bunker Gear Inspection Sheets    | _____ Accident Reports              |
| _____ SCBA Inspection Sheets           | _____ Instructor Assignments        |

General Comments on Course: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_, do hereby certify that this course was conducted in accordance with  
*Print Name*  
all New Mexico Firefighters Training Academy Rules, Regulations, Policies and Safety Procedures.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

***All paperwork associated with the completion of this course must be received by the New Mexico Firefighters Training Academy for processing no later than 10 days from the last scheduled date of the course***