

U.S. Department of Homeland Security (DHS), Federal Emergency Management Agency (FEMA), National Preparedness Directorate (NPD), National Integration Center (NIC), Training and Exercise Integration Secretariat/Training Operations (TEI/TO)

## **BATCH HEADER FORM**

Part 1: Course Inform	nation
Training Provider Abbrev	*
Training Provider Point of	Contact
Last Name*	
First Name*	
Phone*	( )
Email Address*	
Course Name*	
Course Catalog Number*	Start Date* / End Date* / / / / / / / / / / / / / / / / / / /
Start Time* Convert start and end time into military time.	End Time* Contact Hours*
City*	
State*	ZIP Code*
Number of Students*	Average Pre Test Score
Training Method*  Bubble in ONE item that represents the method by which training is being delivered.	
Resident Mobile	○ Indirect
Part 2: Instructor Point of Contact Information	
Last Name*	
Last Name"	
First Name*	
Phone Number*	
Email Address	
Part 3: Batch Preparer Information	
Last Name*	
First Name*	
Phone Number*	
Email Address	

Please submit all forms to: RES Project, c/o Chris Swidersky, Quality Associates, Inc., 8161 Maple Lawn Blvd, Second Floor, Fulton, MD 20759