



FEMA

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

Fields displayed in **bold*** are required and must be completed. Please print characters in CAPITAL LETTERS only using BLACK ink.

Part 1: Course Information

Training Provider Abbrev*

Training Provider Point of Contact

Last Name*

First Name*

Phone* () - -

Email Address*

Course Name*

Course Catalog Number* - - **Start Date*** / / **End Date*** / /
(MM/DD/YYYY) (MM/DD/YYYY)

Start Time* **End Time*** **Contact Hours*** .
Convert start and end time into military time.

City*

State* **ZIP Code***

Number of Students* **Average Pre Test Score** . % **Average Post 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*

First Name*

Phone Number* () - -

Email Address

Part 3: Batch Preparer Information

Last Name*

First Name*

Phone Number* () - -

Email Address