



Alabama Impaired Driving Enforcement Program DWI Detection and SFST Instructor Development Course Training Application

Individual Attending (one per registration):	
Last Name: <input style="width: 300px;" type="text"/>	First Name: <input style="width: 300px;" type="text"/>
Badge # <input style="width: 100px;" type="text"/> D.O.B.: <input style="width: 100px;" type="text"/> <small>(mmdyyyy)</small>	Position: <input type="checkbox"/> Police Officer <input type="checkbox"/> Deputy <input type="checkbox"/> Trooper <input type="checkbox"/> Other LE Related <small>(ie: DFS, ADA, etc.)</small>
E-mail: <input style="width: 300px;" type="text"/>	
<input type="checkbox"/> APOST Certified Police Officer at least 2 years.	Status: <input type="checkbox"/> Patrol <input type="checkbox"/> Investigation <input type="checkbox"/> Training
<input type="checkbox"/> Completed Basic SFST Training with at least 2 years experience.	Rank: <input style="width: 150px;" type="text"/>
Agency Name: <input style="width: 250px;" type="text"/>	Address: <input style="width: 300px;" type="text"/>
Phone Numbers: (OFFICE) <input style="width: 200px;" type="text"/>	City: <input style="width: 200px;" type="text"/>
(MOBILE) <input style="width: 200px;" type="text"/>	State: <input style="width: 100px;" type="text"/> Zip Code <input style="width: 100px;" type="text"/>
Please select your desired training site.	
<input style="width: 800px; height: 20px;" type="text"/>	
<i>Application must be submitted a minimum of 3 weeks prior to the start of the course, unless otherwise specified in the announcement. Confirmation notices will be E-mailed to the address provided below two weeks prior to the start of the course. The specific location and time will be given upon confirmation of attendance.</i>	
Attendance Confirmation: E-mail <input style="width: 300px;" type="text"/> Fax Number <input style="width: 250px;" type="text"/> <small>(no dashes or parentheses)</small> Primary notification will be done via E-mail, faxes will only be used as an alternative.	Supervisory Approval: <small>(Please provide the following information for the individual authorizing your course attendance.)</small> Name <input style="width: 250px;" type="text"/> Rank <input style="width: 250px;" type="text"/> E-mail <input style="width: 250px;" type="text"/>
Course Completion Certificate: E-mail <input style="width: 300px;" type="text"/>	
<small>You <u>must</u> provide an e-mail address for your employing agency to receive a copy of your course completion certificate.</small>	
<small>All instruction and materials are covered by a grant from ADECA. Agency is responsible for lodging and meals. Applicant must attend all sessions.</small>	

EMAIL SUBMISSION IS PREFERRED

TO: Alabama SFST Coordinator

EMAIL: alabamadui@alea.gov

If you have difficulty submitting by email, you may print complete the form send to the physical address below.

Do Not Handwrite.

Please complete and return a **minimum of 4 weeks** prior to the start of the course, unless otherwise specified in the announcement.

Incomplete, Improper or Illegible registrations will be returned.

Alabama DRE/SFST Program, 301 S. Ripley Street, Montgomery, AL 36104