



International Narcotics Enforcement Officers Association

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training@ineoa.org www.ineoa.org

TRAINING REQUEST FORM

AGENCY INFORMATION				Date:	
Agency Name			Phone#		
Agency Address					
Contact Name			Work#		
Cell#		Fax#		E-Mail	
COURSE REQUESTED:					
Dates Requested:			Alternate Date:		
TRAINING SITE INFORMATION					
Address			Phone#		
Nearest Lodging			Nearest Airport		
TRAINING SITE LOGISTICS					
<i>Classroom – needed for all INEOA courses</i>					
Table/Chairs Available?	<input type="checkbox"/> Yes <input type="checkbox"/> No		Screen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
LCD Digital Projector?	<input type="checkbox"/> Yes <input type="checkbox"/> No		VCR/Monitor?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
White Board/Newsprint?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
<i>Reality Based – needed for Tactical Counter Drug Operations, UC Operations, UC Survival</i>					
Enclosed Environment – multiple rooms, entryways, hallways, stairs, ect.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Simunition/Airsoft Available?	<input type="checkbox"/> Yes <input type="checkbox"/> No		Protective Equip?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Range – needed for Tactical Counter Drug Operations, UC Operations, UC Survival</i>					
Range Type: <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor		# of Firing Lanes: _____		Minimum 20 yards	
Comments:					

