



# SHERIFFS CONTINUING EDUCATION REPORT

## Nebraska Law Enforcement Training Center



Reference: Nebraska Statute No. 23.1701.01 and Operating Instruction 50-31

NAME OF SHERIFF:		COUNTY:		DATE ASSUMED OFFICE:	
Sponsor or Institution	Course Title	Dates of Training	Location	Instructor	Training Hours

(Documentation submitted in support of this application for credit should include; course title and context, and hours; dates of course; instructor(s) name(s); location and where held.

I swear or affirm that the information submitted herewith is, to the best of my knowledge, complete and accurate and that I did attend this (these) training session(s).

\_\_\_\_\_  
SHERIFF SIGNATURE

Mail this form and any related documentation to: Nebraska Law Enforcement Training Center, 3600 North Academy Road, Grand Island, NE 68801