

Bureau of Planning, Training and Exercise Pennsylvania Emergency Management Agency Control #

Course Instruction Request (CIR)

D 1 (D)	(fillable	e form)		
Date of Request:				
Requesting Entity:		Type of Entity:		
Contact Name:				
E-mail Add	lress:	Phone Number:		
Type Course:	Other (p	lease specify):		
1. Course Information Course Code & Title:		Course Hours:		
Brief Course Description:				
Instruction Address:				
Primary Date Range:	to Seco	ndary Date Range:	to Yes No NA	
3. Is this event Law Enforcement se4. Is this course included on the PE5. Do you agree to obtain PEMA's a	or other controlled substances or ensitive, or should not be publicly a MA Training and Exercise Plan (TE approval of instructors or course prothird party providers paid for with 1	materials? dvertised by PEMA? EP)? oviders? (Example would incl		
E-mail Addre		Phone Nu	umber:	
3. Funding Source:				
-	Grant Program:		t Year:	
Other: 4. Course Costs:		Project Name:		
Instructor or Course Fee	: Materials	& Services:	Travel:	
Lodging Expenditure:	Meals &	Incidentals:	Other:	
Total Estimated Cost:		& Overtime:		
5. Additional Information (such as in	nstructor names)			
PEMA Course Instruction Declined: Accepted: Reason for Decline or Adminis	EHP: TEP: li	nstructor Assigned: d)	Add to TRAIN PA:	
Accept or Decline Signature:		Reviewing Signature:		

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