

SOUTHEASTERN NEW MEXICO LAW ENFORCEMENT ACADEMY #1 THUNDERBIRD CIRCLE HOBBS, NM 88240

Public Safety Telecommunicator Class P-25-21



	REGISTRATIO	N FORM		
<u>DATES:</u> July 21, 2025 through August 8, 2025	TIME: 0800-1700 hours, B Monday-Friday	LOCATION: ob Moran Building, Room 153	Course F	DST: ee: \$556.00 terials and testing*
LODGING (optional): \$450.00 *\$30.00 per night for 3 weeks training*	MEAL PLAN (optional): \$9.00 *per meal*		FEMA: ICS 100, 200, 700, and 800 Completed (Provide Copies of Certificates)	
If a packet has not been dete	Will you require a meal p nust be sent in as soon as con in our office no later t prmined COMPLETE on/by the deadline, the	npleted. Completed than May 30, 2025 applicant will be scheduled fo	r the next available PST cla	
	solve any outstanding debts that are owed to			
Full Name: Mailing Address:	Date of Birth	City:	SS#:	7in:
Telephone:	E-Mail [.]	City	State	_ zıp
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Contact Person: Contact Person Telephone: Contact Person E-mail:				
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Contact Person Telephone: Contact Person E-mail: PAYMENT METHODS: *Billing will occur after acceptance and class if Please select your payment method: If you selected Credit/Debit Card, ple Credit Card: Visa MasterCard	begins* *Make Checks payable to New Mexic	If you selected <i>Invoid</i> number below:	<i>ce</i> or <i>P.O.</i> , please prov	
Contact Person Telephone: Contact Person E-mail: PAYMENT METHODS: *Billing will occur after acceptance and class of Please select your payment method: If you selected Credit/Debit Card, ple Credit Card: Visa MasterCard Card #:	begins* *Make Checks payable to New Mexic ase provide the information below: Expiration Date:	If you selected <i>Invoid</i> number below: Invoice #:		
Contact Person Telephone: Contact Person E-mail: PAYMENT METHODS: *Billing will occur after acceptance and class if Please select your payment method: If you selected Credit/Debit Card, ple Credit Card: Visa MasterCard Card #: CCV #: Print Cardholder Name:	begins* *Make Checks payable to New Mexic ase provide the information below: Expiration Date:	If you selected <i>Invoid</i> number below: Invoice #:		
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Please email completed registration form to: