

Application for Recognition for Prior Learning: Instructor Certification & Recertification

Prior to completing this application, please read the document: "Recognition of Prior Learning Application Instructions."

Please check the box below to indicate which application you are submitting.

Instructor Certification:

Instructor Recertification:

SECTION 1: GENERAL INFORMATION

What specific course are you applying for Instructor RPL? <i>(List only one course per request)</i>	
--------------------------------------------------------------------------------------------------------	--

Name: (Last, First, Middle)	
Email Address:	
Primary Phone Number:	
Secondary Phone Number:	
Mailing Address:	
City, State, Zip:	
Street Address:	
FEMA SID:	

Current Employer:	
Current Position/Title:	

Application for Recognition for Prior Learning: Instructor Certification & Recertification

SECTION 2: RELEVANT EXPERIENCE

Part A:

1) Name and Location of Course or Incident:	Position Filled: Instructor or SME	Dates of Participation (Starting and ending):
2) Name and Location of Course or Incident:	Position Filled: Instructor or SME	Dates of Participation (Starting and ending):
3) Name and Location of Course or Incident:	Position Filled: Instructor or SME	Dates of Participation (Starting and ending):
4) Name and Location of Course or incident:	Position Filled: Instructor or SME	Dates of Participation (Starting and ending):

You may duplicate this page if you need more sections.

Part B: Attach the appropriate documentation (See instructions for Section 3, Part B).

Part C: Include resume detailing training and experience (See instructions for Section 3, Part C).

Part D: Include an Experience Narrative with the contact names (See instructions for Section 3, Part D).

Part E: Include your signed Instructor Code of Conduct acknowledgment form. (See instructions for Section 3, Part E).

Application for Recognition for Prior Learning: Instructor Certification & Recertification

SECTION 3: RELEVANT TRAINING

Attach scanned PDF color copies (if submitting a paper-based application, submit only color photocopies) of training certificates pertinent to the instructor position for which you request Recognition of Prior Learning (RPL). **Do not send certificates unrelated to the position.**

Attach other certificates if they assist in demonstrating your competency or knowledge, skills, and abilities in the position. **Do not send general certificates unrelated to this instructor position.**

Required training certificates – must be attached.

TEMA Approved Adult Instruction Training

Certificate for the course for which you are requesting credentialing.

Other Pertinent Training – attach if completed.

Describe this training:

Application for Recognition for Prior Learning: Instructor Certification & Recertification

SECTION 4: RECOMMENDATIONS

Name and Title:	Phone Number:	Email:
The reference relates to:		
Name and Title:	Phone Number:	Email:
The reference relates to:		
Name and Title:	Phone Number:	Email:
The reference relates to:		

Application for Recognition for Prior Learning: Instructor Certification & Recertification

SECTION 5: REQUIRED SIGNATURES

Applicant

By signing below in the applicant section, I hereby certify that the information recorded on this application is true and correct.

PRINTED NAME AND TITLE	DATE	SIGNATURE
Applicant: <i>(Required)</i>		

Review and Support

I have reviewed the application and support the applicant's request to be recognized for prior learning in the position indicated.

PRINTED NAME AND TITLE	DATE	SIGNATURE
Direct Supervisor: <i>(Required)</i>		
Agency Head: <i>(Required)</i>		
TEMA Training Program Manager <i>(Required)</i>		

IQRB USE ONLY	DATE	Approve/Disapprove
IQRB Approval/Disapproval <i>(Required)</i>		