

APCO Institute 351 N. Williamson Blvd Daytona Beach, FL 32114 (386) 322-2500

Qualifications Summary / Application Adjunct/Contract Instructor

Nam	e (Last, First, MI)			
Maili	ng Address			
City/S	State/ZIP			
Hom	e Phone Work Phone Fax Number			
Emai	il address APCO Membership Number			
1.	How many years have you been involved in public safety?			
2.	How many years have you been involved in public safety communications?			
3.	How many years have you been involved in training?			
4.	What positions have you held in communications? How long?			
	Telecommunicator			
	Telecommunications Supervisor			
	Telecommunications Trainer			
	Communications Center Director / Manager			
	Training Designer			
	Other positions			
5.	Education Level?	-		
	□Associate Degree □Bachelor Degree □Graduate Degree			
	Majors			
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6. Please indicate all current APCO Institute certifications that you hold, with the date for each. Also detail any Instructor Techniques courses and/or Methods of Instruction courses you have completed. Please include copies of any certificates with this form.

APCO Course		Date Certified	
	Public Safety Telecommunicator Course		
	Telecommunicator Instructor Course		
	Communications Training Officer Course		
	CTO Instructor Course		
	Communications Center Supervisor Course		
	Fire Service Communications Course		
	Stress		
	Basic Emergency Medical Dispatch		
	EMD Instructor		
	EMD Manager		
	Other APCO Course(s)		
Other Instructor Techniques Courses			

Submit your completed application, along with the following items, to adjunct@apcointl.org

- Letter of recommendation from a former student
- Letter of recommendation from immediate supervisor
- Letter of support from agency director for travel and participation
- A scheduled live demonstration in WebEx of your instructional skills and abilities
- Copy of resume
- Training references: Please include any references by name, title, mailing address, e-mail address, and complete phone number.