RADAR/LIDAR INSTRUCTOR KITS
REQUEST FORM

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MAIL REQUEST TO: **LAW ENFORCEMENT TRAINING**
CRIMINAL JUSTICE CENTER
1302 EAST HWY 14, Ste. 5,
PIERRE, SD 57501-8505 or fax to (605)773-7203

(REQUESTS MUST BE SUBMITTED <u>TWO</u> WEEKS PRIOR TO CLASS DATE)

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( ) **RADAR KIT** ( ) **LIDAR KIT**

INSTRUCTOR'S NAME: _____ AGENCY: _____

MAILING ADDRESS: _____ PHONE #: _____

EMAIL ADDRESS: _____

DATE(S) KIT WILL BE NEEDED: _____

NUMBER OF MANUALS/TEST BOOKS NEEDED: _____ # OF ANSWER SHEETS: _____
(Cases hold 25)

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(FOR OFFICE USE ONLY!) KIT NUMBER ASSIGNED: _____

DATE SENT: _____ DATE KIT DUE BACK: _____

INVENTORY OF KIT CONTENTS: COMPLETE KIT: _____ INCOMPLETE: _____

DESCRIBE ITEMS: _____

_____

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ATTENTION ALL INSTRUCTORS!! <u>EACH KIT MUST BE RETURNED BY THE DUE DATE LISTED ABOVE.</u> CONTENTS OF THE KIT WILL BE INVENTORIED BEFORE AND AFTER YOUR USE. YOU WILL BE RESPONSIBLE FOR MISSING ITEMS. THIS FORM SHOULD REMAIN WITH THE KIT AT ALL TIMES.

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INSTRUCTOR SIGNATURE: _____ DATE: _____