

CERTIFICATION OF FIELD TRAINING

I certify that _____
(Print Name of Officer & ID #)

has completed 80 hours of field training as of _____ 20____, as specified in
Index Code 802.1, and required by COMAR 12.04.01.21.

(Platoon Commander)

(Date)

NOTE: Completed form is to be forwarded to the Commander of the Training Academy.

Index Code 802.1
Appendix A

PD Form 802.1