



REGISTRATION FORM

40 HOUR IN-SERVICE TRAINING



ATTENTION: LIEUTENANT PAULA HENTGES
228-896-0685

CLASS START DATE: _____

COURSE COST: FREE _____

STUDENT INFORMATION

Students Name: _____

Phone Number: _____

Social Security Number: _____

AGENCY INFORMATION

Place of Employment: _____

Supervisor Name: _____

Supervisor Phone Number: _____

Please send registration form to:
Harrison County Sheriff's Office ♦10451 Larkin Smith Dr. ♦ Gulfport, MS 39502 ♦
paula.hentges@harrisoncountysheriff.com ♦PH 228-896-0685 ♦ FAX 228-896-0608