

OFFICE OF ATTORNEY GENERAL BUREAU OF CRIMINAL INVESTIGATION SFN 60227 (08-2018)

## You have 15 days to submit this form to BCI after testing is completed. Test Administrators must maintain a copy of this roster for 1 year from the date of completion.

Instructor Name	Instructor Number	Class 1 or Class 2
Training Location		Testing Date

Date of Birth	Name	Address, City, State, ZIP Code	Pass/Fail
Signature Date			