



# SONOMA COUNTY CERT

## CERT "MAKE-UP CLASS" FORM

(To be used when attending a class other than the program you originally started)

This form is to be filled out in ink and must be returned to the original instructing agency for credit to be applied to the student. Please PRINT all information.

### YOUR INFORMATION

LAST NAME, FIRST NAME, M.I.	
ADDRESS (Street, City State, Zip Code)	
PHONE NUMBER	

### ORIGINAL CLASS

ORIGINAL CLASS LOCATION AND START DATE	
AGENCY THAT PROVIDED ORIGINAL TRAINING	
NAME OF ORIGINAL CLASS INSTRUCTOR	

### MAKE-UP CLASS

CLASS SESSION BEING MADE UP	
DATE/TIME OF THE MAKE-UP TRAINING	
LOCATION OF THE MAKE-UP TRAINING	
AGENCY PROVIDING MAKE-UP TRAINING	
NAME AND PHONE NUMBER OF THE MAKE-UP CLASS INSTRUCTOR	
SIGNATURE OF THE MAKE-UP CLASS INSTRUCTOR	

REMINDER: NOT ALL CERT PROGRAMS ARE FEMA-COMPLIANT. It is the responsibility of the original training organization to either accept or deny this make-up class.