



# Breath Test Operator Renewal – 4 hours

## CWL – 0086      FDLE - 951

<p><b>Instructor:</b> <b>John Donlon</b></p> <p><b>Date(s):</b> <b>December 8, 2017</b></p> <p><b>Time: 8am-12pm</b></p> <p><b>Location: J-114</b> <b>2990 College Dr.</b> <b>St. Augustine, FL</b></p> <p><b>Cost:</b> No cost to officers in Region V.</p> <p><b>Class Limit: 20 Students</b></p> <p><b>Dress Code: Business Casual (NO Flip Flops, Jeans, Shorts, Tank tops, or T-shirts unless specified.)</b></p> <p><b>All questions should be directed to:</b></p> <p><b>John Donlon-</b> <b>Instructor/Coordinator</b></p> <p>(904) 808-7493</p> <p><a href="mailto:johndonlon@sjrstate.edu">johndonlon@sjrstate.edu</a></p> <p><b>Connie Ramos – Program Assistant</b> (904) 808-7491 <a href="mailto:ConnieRamos@sjrstate.edu">ConnieRamos@sjrstate.edu</a> <b>Fax: 904-808-7424</b></p>	<p>The student will review the role of a breath test operator as it relates to obtaining and analyzing breath samples during the breath test and how to obtain and maintain a Breath Test Operator permit.</p> <p>Students must pass a written end of course exam with a score of 80% or better</p> <p>Class size is limited so sign up early</p> <p><b>Deadline for Registration: November 30, 2017</b></p> <p>Officer’s Name: _____</p> <p>SSN    _____ - _____ - _____</p> <p>Officer’s Email Address: _____</p> <p>Agency _____ Agency Phone # _____</p> <p>Agency FAX# _____</p> <p>Authorization Signature _____</p> <p>Printed Authorization Name: _____</p> <p>Authorizing Person’s Email: _____</p> <p>Department Approved for:</p> <p>Salary Incentive: _____</p> <p>Mandatory Retraining: _____</p> <p>Other Training: _____</p>
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