Paperwork Burden Disclosure Notice

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REMARKS	19. OVERALL COURSE I	TO YOUR	16. ADMISSIONS/ REGISTRATION: 17. STUDENT SERVICES:	SHADE IN 1
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• ERASE COMPLETELY TO CHANGE

• USE NO. 2 PENCIL OR BLUE/BLACK PEN

MAKE HEAVY, DARK MARKS

You are not required to respond to this collection of information unless a valid OMB Control Number is displayed in the upper right corner of this form. SAMPLE:

COURSE EVALUATION FORM

NATIONAL EMERGENCY TRAINING CENTER EMERGENCY MANAGEMENT INSTITUTE

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	COURSE MANAGER														
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	(VIEWGRAPH)			COND DIGIT		1	2	3	4	5	6	7	8	9	
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	MANAGEMENT ROLE:			County			Oth	ner			Scou	ts			
				City/Town							RACI	ES			
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