



WVPST

Martinsburg

1-800-367-3728 or 304 596-2653

TRAINING REQUEST FORM

Date of Request: 6, 30, 21
Name of Organization: WILEY FORD VFD
Mailing Address: P O BOX 11
City: WILEY FORD County: MINGONAL State: WV Zip: 26767
Contact Person: BILL LINDSAY
Contact Phone: 240-362-4140
Contact email: BILLS823@HOTMAIL.COM
Type of Program Requested: EMT RE-CERTIFICATION
Class Start Date: JULY 23, 2021 Number of Students Expected: 10
Days and Times for class sessions: PAULA WILL SET
DATES AND TIMES
Location of Training: WILEY FORD
Physical Address of Training Location: 149 SHATZBY STREET
WILEY FORD WV 26767
Instructor (if known): PAULA DETMICK

Is the requesting organization willing to cover the cost of the course if fewer than 15 participants enroll, or fewer than 10 participants complete the course?

Yes No

Name of person authorizing yes or no answer above BILL LINDSAY

Send completed form to: WVPST, 109 South College Street, Martinsburg, WV 25401

Fax: 304 267-3599

Or by email to: dplume@k12.wv.us