

Non-USACE/AMC Other Government Agency

Office Symbol: _____ Date: _____ MEMORANDUM FOR USACE Deployment

Center SUBJECT: Training Certification For Rank: _____ Name: _____

1. I certify that the subject individual has completed the following training requirements within the past 12 months. I have initialed either YES or NO for each requirement.

EOC Initials

	REQUIREMENT	YES	NO
1	Anti-Terrorism Level 1(Certificate Attached)		
2	Force Protection		
3	Operational Security(OPSEC)		
4	Heat Injury Prevention		
5	Equal Opportunity/Prevention of Sexual Harassment(EO/POSH)		
6	Threat Awareness and Reporting Program (TARP)		
7	General Orders		
8	Suicide Prevention		
9	Trafficking		
10	Report Intelligence Information		
11	Fraternization Policy		
12	Cultural Awareness (Country Brief for this Individual's Destination)		
13	Core Army Values		
14	Personal Recovery Training		
15	Personal Recovery Pro-File		
16	Composite Risk Management		
17	Army Accident Avoidance Course		
18	SERE 100		
19	Introduction to Biometrics and Biometric Systems		
Counterinsurgency (COIN) Training			
21	COIN 101 Part 1		
22	COIN 101 Part 2		
23	Foundations of Insurgency		

The point of contact for this action is: _____

Phone Number: _____

Email: _____

Signature: _____

Printed Name: _____

Title: _____

UNIT: _____