

## CORE Training January 28 – 30, 2026 Biographical Sketch Questionnaire



<u>Purpose:</u> To help the instructors tailor this class to best meet your needs and to familiarize themselves with you.

Please complete this questionnaire, save it using your **last name (i.e., smith.docx)**, attach a jpeg photograph of yourself, and email it to <u>info@fpca.com</u>.

Our instructors thank you in advance for providing this information no later than Tuesday, January 20, 2026. Please note: if we do not receive this form back by the due date, we will not be able to include it in training material. Thank you for understanding our printing deadline.

Full Name:		
Nickname/Preferred Name:		
Agency:		
Work Address:		
Work Phone:		
Work Email:		
Cell phone:		
Education:		
Name of Chief:		
Years at agency:		
Other CORE trainings attended:		
Professional Experience:		

What are your expectations of the CORE Training?			
Personal Information			
Hobbies/Items of Interest About You:			
Month/Day of Birth:			
Pets:			
Spouse or Significant Other:			
Agency Demographics			
Service Population:			
Jurisdiction Size (in square miles):			
No. of Agency Sworn:	No. of Agency Civilian:		
Agency Accredited: Yes No	CFA	CALEA	
How did you hear about this training?			
Please save this completed questionnaire by your last name and return it, along with a head shot of yourself, to <a href="mailto:info@fpca.com">info@fpca.com</a> .			