

**Instructor Activity and Payment  
Required for Funded and Unfunded Courses**  
Michigan Department of Labor & Economic Growth  
Bureau of Fire Services / Office of Fire Fighter Training  
P.O. Box 30700, Lansing, MI 48909  
517-241-8847

**Funded  
Unfunded**

COURSE NAME	START DATE	END DATE	COURSE NUMBER
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**Status: C = Certified P = Probationary O = Other (Refer to instructions on back)**

Instructor of Record (Last Name, First Name, Middle Initial)	Status	Social Security Number*	Hours	Payment	OFFT Use Only

Additional Instructors / Evaluators (Last Name, First Name, Middle Initial)	Status	Social Security Number*	Hours	Payment	OFFT Use Only
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					

**Total**

**Payment to Organization**

Name of Organization	Federal ID Number	Course Payment

**Comments**

**Signatures**

Knowingly reporting false information shall result in decertification of the responsible instructor and/or course manager.

COURSE MANAGER OR INSTRUCTOR OF RECORD NAME (Print)	COURSE MANAGER OR INSTRUCTOR OF RECORD SIGNATURE	DATE

Authority: 1966 PA 291  
Completion: Required  
Penalty: Payment will not be issued

The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

\*This information is confidential. Disclosure of confidential information is protected by the Federal Privacy Act.

Original: Lansing Office w/ Final Paperwork  
Copies: Lansing Office w/ Final Paperwork  
Course Manager

