Florida Department of Law Enforcement
Alcohol Testing Program

Notification of Specialized Training Course

Please check the appropriate course:

- ✓ **Breath Test Operator Course** FDLE #852
- _____ **Breath Test Operator Renewal Course**
- _____ **Agency Inspector Course**
- _____ **Agency Inspector Renewal Course**
- _____ **Other (Please Specify)** _____

Date(s) and Time(s) of the Course January 7-8 2027 9am-6pm (Thurs-Fri)

Training Center Florida Public Safety Institute

Training Center Address 75 College Drive, Havana, Florida 32333

Physical Location of Training Eastern Florida State College, Melbourne, Florida
(If different from Training Center)

Anticipated Number of Students 15

List Names and Areas of Expertise of Guest Instructors N/A

Will Primary Instructor Need FDLE/ATP Assistance? **Yes ( )** **No** ☒

Nature of Assistance Needed _____

Primary Instructor's Name Darin Morgan

Primary Instructor's Address Eastern Florida State College, Melbourne, Florida

Primary Instructor's Telephone 321-693-9055 **Fax** _____

Remark(s) _____

I agree to notify FDLE/ATP prior to conducting the course if any of the above information changes.

Darin Morgan 11/18/2026

Primary Instructor's Signature **Date**

Jerry Barrett 11/18/2026

Training Center Director or Designee Signature **Date**

FDLE/ATP Telephone (850) 617-1290 **FDLE/ATP Fax (850) 921-3787**