

**Delta College Public Safety & Training**  
PLEASE POST THIS INFORMATION AND DISTRIBUTE TO SHIFT COMMANDERS

**BELOW 100 Training**

The Below 100 Program is designed to drastically reduce law enforcement Line of Duty Deaths (LODD's). The Below 100 program specifically addresses the operational areas of law enforcement that contribute to the greatest number of LODD's, but are in large part preventable. The Below 100 program is an effort to instill a culture of safety in law enforcement agencies that will progressively reduce national LODD's to Below 100 annually. Instructional methods include lecture, guided discussion and video case studies.

**Course Date:** Nov 19, 2019

**Course Time:** 8:00am-12:00pm

**Course Instructor:** Tom Gillman - Below 100 Core Instructor

**Course Location:** Delta College, Room C111

**Course Fee:** \$0.00 per person

**MCOLES Registered**  
**Registration Deadline:** November 14, 2019

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| <b>Cancellation Policy</b><br>Class reservations may be cancelled up to 7 calendar days prior to the first day of class with 100% refund; less than 7 days, but prior to the first day of class with a 50% refund; on the first day of class with a 0% refund. All "no shows" will be charged full price. | <b>For information regarding the Delta College Public Safety &amp; Training seminars and other non-credit programs, please visit our website at <a href="http://www.delta.edu/policeacademy">www.delta.edu/policeacademy</a> or call Dawn Jurik at (989) 686-9176</b><br><b>E-mail: <a href="mailto:dawnjurik@delta.edu">dawnjurik@delta.edu</a></b><br><b>Fax: (989) 667-2211</b> |                     |
| <b>Delta College Public Safety &amp; Training Registration</b>                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                    |                     |
| Registrant's Name (Please Print)                                                                                                                                                                                                                                                                          | Home Phone                                                                                                                                                                                                                                                                                                                                                                         | Daytime Phone       |
| Home Address                                                                                                                                                                                                                                                                                              | E-MAIL                                                                                                                                                                                                                                                                                                                                                                             |                     |
| City          State          ZIP Code                                                                                                                                                                                                                                                                     | MCOLES # (if applicable)                                                                                                                                                                                                                                                                                                                                                           | Date of Birth       |
| Department Name                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                    |                     |
| Department Street Address                                                                                                                                                                                                                                                                                 | Department City                                                                                                                                                                                                                                                                                                                                                                    | Department ZIP Code |
| Course Name                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                    |                     |
| <b>Upon registration, your agency will be invoiced.</b>                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                    |                     |

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