

Letter of Support

[Company]
[Street Address, City, ST ZIP Code]
Tel [Telephone] Fax [Fax]
[Email]
[Website]

replace with
LOGO

[Click Here to Select A Date](#)

[Recipient Name]

[Recipient Street Address, City, ST ZIP Code]

Dear [Recipient],

Body of Letter

1. Request individual, by name, to become a state-certified instructor for your county.
2. Provide individual's experience in mid-level incident management.
3. Identify individual's qualifications in techniques of instruction and adult education methodologies.
4. Endorsement of the individual to be a state-certified instructor.

Sincerely,

Signature of Sponsor