

DPS STAFF USE ONLY	
Date of misconduct:	Date report received:
Allegation/Offense:	Case Number:
Date notified employer misconduct report received:	
Date Referred to Attorney General's Office:	
Referred by:	
Date NCA mailed:	Date NCA served:
Date NFD mailed:	Date NFD served:
Date of Informal hearing:	
Date of Formal Hearing:	
Date of NMLEA Board Action:	
Final Action:	
Date notified employer of final action:	
Dates of database entry:	