

2024 - 2025 ANNUAL AND BIENNIUM AGENCY IN-SERVICE TRAINING REPORT LAW ENFORCEMENT OFFICER

I, _____ of _____
(print or type agency head's name) Title

(print or type agency name)

(print or type agency location)

(print or type agency contact phone number) (print or type agency contact email address)

verify that as of _____ ALL law enforcement officers employed with this agency, with
(enter date of report)
the exception of those listed on Page 2, have met the mandatory In-service Training Requirements as set forth in the New Mexico Administrative Code, 10.29.7.8, 10.29.7.8, and Article 7 of the Law Enforcement Training Act outlined in New Mexico State Statute Annotated 1978. Course rosters have been submitted to the NMLEA within 30 days of training completion. The training documentation is available for inspection.

- Minimum of Four (4) hours - Safe Pursuit Procedures (29-20-3 NMSA 1978).
- Minimum of Two (2) hours - Detection, Investigation and Reporting of Hate Crimes (31-18B-5 NMSA 1978).
- Minimum of Four (4) hours - Firearms training (minimum of 3 hours day/night; 1 hour classroom) (10.29.7.8A[6] NMAC).
- Minimum of Two (2) hours – Interaction with Persons with Mental Impairments (29-7-7.5 NMSA 1978).
- Minimum of Two (2) hours – Legal Update (10.29.7.8A[10] NMAC).

For all officers who may be involved in the arrest of DWI offenders, Four (4) hours SFST Update or Sixteen (16) ARIDE.

Total number of certified Law Enforcement Officers in the agency: _____

*I understand that failure to submit this report by **March 1st** of the reporting year (2026) may result in the suspension of the Law Enforcement Officer certification of my employees.*

Please attach a list of employees that this affidavit certifies as having completed their Biannual In-Service training requirements. Include last name, first name and certification number.

State of New Mexico)
County of _____) **SS.**

I, _____, being first duly sworn, depose and state (based upon
(print or type agency head's name)
information, belief, and available documentation): I am the agency head of the _____
(print or type agency name)
and the foregoing report is true and correct to the best of my personal knowledge.

Subscribed and Sworn before me this _____ day of _____, _____.

(Agency head's signature)

Notary Public

Notary Stamp/Seal

My commission expires: _____

2024 - 2025 Exception Report
Biannual In-Service Training (Law Enforcement Officer)
 Officers **NOT** meeting the mandatory in-service training requirements:

	Last Name	First Name	DOB	Cert. #
1				
2				
3				
4				
5				

Name: _____ **Cert#/SSN:** _____

Explanation: Why is the officer not in compliance with the In-service Training Requirement

Remediation: What steps are being taken to bring the officer into compliance?

Timelines: What are the deadlines that are proposed to bring the officer into compliance?

=====

Name: _____ **Cert#/SSN:** _____

Explanation: Why is the officer not in compliance with the In-service Training Requirement?

Remediation: What steps are being taken to bring the officer into compliance ?

Timelines: What are the deadlines that are proposed to bring the officer into compliance?

(use additional sheets if necessary)

2024 - 2025 Biannual Exception Report Compliance Reporting (Law Enforcement Officer)

Last Name: _____ **First Name:** _____ **Cert. #:** _____

Mandated Training Hours: 29-7-7.1 through 7.7 NMSA 1978; and 10.29.7.8 NMAC (minimum 19.5 hours)					
Course	Date Attended	Hours Mandated	Hours Taken	Instructor(s)	Location/Agency
Hate Crimes		2			
Safe Pursuit Policy		4			
Firearms		4			
Mental Impairments		2			
Legal Update		2			
HOURS:		14			

10.29.7.8 NMAC: Balance Optional training hours. (mandated plus other must total 40 hours minimum)					
Course	Date Attended	Course Hours	Hours Taken	Instructor(s)	Location/Agency
SFST Update		4			
A.R.I.D.E		16			
TOTAL HOURS:					

(use additional sheets if necessary)

The above listed law enforcement officer previously reported as out of compliance, has been brought into compliance for the reporting period of _____ (year 1) to (year 2) _____.

Date

Submitted: _____

2024- 2025 Biannual Exception Report Compliance Reporting (Law Enforcement Officer)

Officer achieving compliance with the mandatory In-Service Training requirements:

Last Name: _____ **First Name:** _____ **Cert. #:** _____

Agency: _____

Address: _____

Contact# _____

Email: _____

Submitted by: _____

(print name and title)

Contact# _____

Email: _____

Signature of submitting official: _____

Registry Input by:	Acadis® entry by:
--------------------	-------------------