

2025 ANNUAL 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 Annual In-service Training Requirements as set forth in the New Mexico Administrative Code, 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 will be made available for inspection upon request.

Minimum of One (1) hour *annually* - Domestic Abuse Incident training (29-7-4.1 NMSA 1978).

Minimum of Two (2) hours *annually* - Child Abuse Incident training (29-7-4.2 NMSA 1978).

Minimum of One (1) hour *annually* - Missing persons and AMBER alert training (29-7-7.4 NMSA 1978).

Minimum of One (1) hour *annually* - Ensuring Child Safety after Arrest training (29-7-7.3 NMSA 1978).

Minimum of Thirty (30) minutes *annually* - Tourniquet and Trauma Kit training (29-7-7.7 NMSA 1978).

Minimum of Four (4) hours *annually* - Handling a Crisis (29-7-4.4 NMSA 1978).

Minimum of One (1) hour *annually* - Peer to Peer Intervention (29-7-4.4 NMSA 1978).

Minimum of One (1) hour *annually* - Racial Sensitivity (29-7-4.4 NMSA 1978).

Minimum of One (1) hour *annually* - Stress Management (29-7-4.4 NMSA 1978).

Minimum of Four (4) hours *annually* - Use of Force Minus Vascular Neck Restraints (29-7-4.4 NMSA 1978).

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

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

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

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 _____
and the foregoing report is true and correct to the best of my personal knowledge.
(print or type agency name)

Subscribed and Sworn before me this

_____ day of _____, _____

(Agency head's signature)

Notary Public _____

Notary Stamp/Seal

My commission expires: _____

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

| | Last Name | First Name | DOB | Cert. # |
|---|-----------|------------|-----|---------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

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?

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)

2025 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 16.5 hours) | | | | | |
|---|----------------------|-----------------------|--------------------|----------------------|------------------------|
| Course | Date Attended | Hours Mandated | Hours Taken | Instructor(s) | Location/Agency |
| <i>Tourniquet & Trauma Kit</i> | | .5 | | | |
| <i>Domestic Violence</i> | | 1 | | | |
| <i>Child Abuse</i> | | 2 | | | |
| <i>Missing Persons & Amber Alert</i> | | 1 | | | |
| <i>Ensuring Child Safety</i> | | 1 | | | |
| <i>Handling a Crisis</i> | | 4 | | | |
| <i>Peer to Peer Intervention</i> | | 1 | | | |
| <i>Racial Sensitivity</i> | | 1 | | | |
| <i>Stress Management</i> | | 1 | | | |
| <i>Use of Force</i> | | 4 | | | |
| HOURS: | | 16.5 | | | |

The above listed law enforcement officer previously reported as out of compliance, has been brought into compliance for 2025.

Date

Submitted: _____

2025 Exception Report Compliance Reporting (Law Enforcement Officer)

Officer achieving compliance with the mandatory 2025 Annual 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: