

# ARIDE Registration Form

(Please print clearly. This information will be used for your certificate and official records)

## Personal Information

Name: \_\_\_\_\_  
Last First MI

TCOLE PID: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Home Address\* \_\_\_\_\_  
Street or Box No

\_\_\_\_\_ City State Zip

Work Phone: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Cellular Phone \_\_\_\_\_

Email Address: \_\_\_\_\_

Peace officer Status\*\*: Full Time: \_\_\_\_\_ Other: \_\_\_\_\_

(if you are a peace officer, check the appropriate box. This is for your TCOLE records)

## Agency/ Company Information

Agency/Company Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_  
Street or Box No

\_\_\_\_\_ City State Zip

Job Title: \_\_\_\_\_

## Course Information

Course Title ARIDE Credit Hours: 16

Starting Date: 04/29/2020

Ending Date: 04/30/2020

Course Location: Victoria Co. Sheriff's Office

101 N. Glass St  
Site Address

Victoria TX 77901  
City State Zip

After completing application, please e-mail to [aride@shsu.edu](mailto:aride@shsu.edu) or Fax to 936-294-3263

**WALK-INS WILL NOT BE ACCEPTED. CHANGES/CANCELLATIONS SHOULD BE REPORTED TO [aride@shsu.edu](mailto:aride@shsu.edu) PRIOR TO THREE (3) BUSINESS DAYS OF FIRST DAY OF TRAINING.**

Signature: \_\_\_\_\_ Date: Sign: \_\_\_\_\_



## Advanced Roadside Impaired Driving Enforcement

Victoria, TX  
April 29 – 30, 2020



### **\*\*MANDATORY\*\***

Attach copy of TCOLE report showing completion of 24-hour SFST course.

*Registration is not complete until we have report.*

Exceptions are Texas DPS and Texas Parks & Wildlife.