Pennsylvania DUI Association
2413 North Front Street
Harrisburg, PA 17110
(717) 238-4354
800-62 PA DUI

PENNSYLVANIA ALCOHOL HIGHWAY SAFETY PROGRAM

UAD INSTRUCTOR RECERTIFICATION

This form should be filled out and submitted by the DUI Coordinator. If the Coordinator is the Instructor seeking recertification, this form should be submitted by the Coordinator's immediate supervisor. As a reminder, recertification is required every two (2) years.

1. Instructor's Name _____
   LAST FIRST MI

2. County _____

3. Instructor's Address _____

   _____

4. Instructor's Telephone Number _____

5. Last Date Certified or Recertified _____

6. The Instructor has received the appropriate number of credits (9 for those who are also CRN Evaluators or DUI Instructors- 12 for those who are not) over the past two years. Please list courses, dates attended and credits below:

   _____ _____

   _____ _____

7. I (or a designee) have monitored at least one (1) entire Underage Drinking Course taught by the Instructor during the past two (2) years in which the Instructor used the approved curriculum and adequately covered the course topics.

8. List date of last class taught _____

9. I recommend that the above listed Instructor be Recertified.

   _____ _____
   DUI Coordinator's Signature Date

   DUI Coordinator: _____ (please print)

   Telephone Number _____