



National TIM Responder Training Program Completion Certificate

This acknowledges that

License Number, State: _____

has successfully completed the
**National Traffic Incident Management
 Responder Training Course | FHWA-NHI-133126A**

This CE activity is accredited for four basic CEH by CAPCE

Date: _____ *Location:* Federal Highway Administration
 National Highway Institute

Dr. Jon R. Krohmer, M.D.
 EMS Medical Director

FEDHA042
 CAPCE Provider Number: _____



You have participated in a CE program that has received CAPCE approval for CE credit. If you have any comments regarding the quality of this program and/or your satisfaction with it, please contact CAPCE at: CAPCE, 12300 Ford Road, Suite 350 Dallas, TX 75234, Phone: 972-247-4442, Email: jscott@CAPCE.org. CAPCE represents only that its accredited programs have met CAPCE standards for accreditation. These standards require sound educational offerings determined by a review of its objectives, teaching plan, faculty, and program evaluation processes. CAPCE does not endorse or support the actual teachings, opinions or material content as presented by the speaker(s) and/or member organization. CAPCE accreditation does not represent that the content conforms to any national, state or local standard or best practice of any nature. No participant may have any cause of action against CAPCE based on the accreditation of the material.