



Scales Mound Protection District  
Chief Carl Winter  
130 Franklin Street  
Scales Mound, IL 61075  
815-845-2300

## Education Form

Date Submitted: \_\_\_\_\_

Name of Student: \_\_\_\_\_

Location of Class: \_\_\_\_\_

Dates: \_\_\_\_\_

1.) Class Title: \_\_\_\_\_

2.) Class Title: \_\_\_\_\_

Registration Costs: \_\_\_\_\_

Note: All registration forms are submitted by the District.

Request For: (check all that apply)

Mileage \_\_\_\_\_ Lodging & Hotel Rate \_\_\_\_\_ Meals & # of Days \_\_\_\_\_

Tuition \_\_\_\_\_ Dept. Vehicle \_\_\_\_\_ Labor Allowance & # of Days \_\_\_\_\_

Fire Department Equipment Usage (List below)

1.) \_\_\_\_\_

2.) \_\_\_\_\_

Chief Carl Winter

Date