Department or Agency Letterhead

12/10/23

IFSTA Account Manager,

Please accept these instructors and allow them Instructor Access to ResourceOne®. These individuals are qualified instructors and are responsible for Firefighter Training and Certification at [*Insert department/organization name here*]*.*

1. Lt. Dan Smith ([dan.smith@firedepartment.org](file:///C:\Users\ameliak\Downloads\dan.smith@firedepartment.org))
2. Jeff Smith ([jeff.smith@firedepartment.org](file:///C:\Users\ameliak\Downloads\jeff.smith@firedepartment.org))
3. Guy Jones ([guy.jones@firedepartment.org](file:///C:\Users\ameliak\Downloads\guy.jones@firedepartment.org))

Thank you,

[*Name of Person Authorizing the Request for the Material]*

[*Title of Authorizing Agent*]

**If the following items are not on the letterhead they must be provided here:**

[Full Physical Business Address. PO Box will not be accepted]

[Department’s or Agency’s Phone Number where the Authorizing Agent can be contacted]