

## **CERTIFICATE OF TRAINING**

This is to certify that I have completed training for NAVSEA ACTIVE SHOOTER TRAINING

**TODD ROBBINS**

**1/7/2020    30492/7332**

Name:

Date:

Component/Office:

Continuing Education Units: 0

By digitally signing and submitting your proof of training certificate, you certify that you have reviewed and understand the information in this training course.

**TODD ROBBINS**

Signature (Digitally Signed)