

# Master Collision Reconstructionist Certificate

## Complete Required Certificate

Collision Reconstructionist

## Complete Required Courses

Pedestrian/Auto Reconstruction

Forensic Photography II

*Note: All courses must be taken within seven (7) years of the date of the application. Only one course from another training provider will be accepted if the curriculum and hours match TEEX curriculum.*

## Purchase Options (Pick One)

Standard Certificate - \$37

Signature Texas Forensic Science Academy  
 Frame with Embedded Challenge Coins -  
 \$240



# Master Collision Reconstructionist Certificate

Your name will appear on your certificate as written. Please use your legal name and type or print clearly.

## Student Information

*\*Social Security Number (SSN) is used for record keeping purposes only and TCOLE credit (if applicable).*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Suffix: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_ OR TEEEX Student Identification #: \_\_\_\_\_

U.S. Citizen?  Yes  No Non-U.S. Identifier: \_\_\_\_\_ Veteran?  Yes  No

## Affiliation Information

Agency Name: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

### Texas Participants – Texas Commission on Law Enforcement

Ensure that you have included Date of Birth above TCOLE PID #: \_\_\_\_\_

Please email or fax your application to [ILEPSE@teex.tamu.edu](mailto:ILEPSE@teex.tamu.edu) / Fax: (877) 289-9715.

## For Office Use Only

Date Application Received: \_\_\_\_\_ Date Application Approved: \_\_\_\_\_

Approving Program Manager: \_\_\_\_\_

Date Certificate Issued: \_\_\_\_\_ Issued By: \_\_\_\_\_