Click or tap to enter a date.

Office of the Registrar
Thomas Edison State University
111 West State St.
Trenton, NJ 08608

Dear Registrar:

Please accept this signed letter as verification that the individual named below has successfully completed the Entergy Nuclear training course at Click here to enter FACILITY NAME AND LOCATION.

Full Name: Click here to enter First Name, M.I., Last Name and Suffix

Street Address: Click here to enter Street Address

City: Click here to enter City State: Click here to enter State Zip Code: Click here to enter Zip

Date of Birth: DD-MM-YYYY.

TESC ID# (if known) or last four digits of SSN: Click here to enter ID#

|  |  |
| --- | --- |
|  **Entergy Nuclear Training Course** | **Date of Completion (MM-YYYY)** |
| [ ]  Introduction to Nuclear Power Emergency Preparedness | MM-YYYY |

If you have any questions regarding this document, please contact Click here to enter POC Name at Click here to enter Phone#.

With my signature below, I certify that the Entergy Nuclear officially notified Click here to enter FACILITY NAME AND LOCATION that the student identified above has successfully completed the training course indicated above.

Sincerely,

Click here to enter Signatory’s Name & Title