

## Working Test Period Sample Letter

This letter must be printed on official letterhead and signed by the  
PSAP Director or Chief.

### Date

Department of Emergency Services and Public Protection  
Division of Statewide Emergency Telecommunications  
1111 Country Club Road  
Middletown, CT 06457

Re: Emergency Telecommunicator Recertification

To Whom It May Concern:

In accordance with the provisions of Section 28-30-10 (a), of the State of Connecticut Regulations of the Department of Public Safety, please be advised that **Telecommunicator's Name** has successfully completed his/her probationary work period.

I can be reached at **(phone number)** if you have any questions.

Sincerely,

**(PSAP Director or Chief)**