

AGENCY LETTERHEAD

DATE

MEMORANDUM FOR

Branch Chief
Financial Fraud and Investigative Analysis Branch
Investigative Operations Division
Federal Law Enforcement Training Centers

THRU

Special Agent in Charge
XXX Fraud Field Office
XXX, XXXX, XX

FOR

Director
XXXXXXXXXXXXXXXXXX

SUBJECT: Intent to Complete Fraud Investigator Certificate

REFERENCE: FLETC Directive 500-23 Fraud Investigator Certificate

1. On (DATE), (TITLE), Employee Name, (AGENCY), will begin course work toward completion of the Fraud Investigator Certificate (FIC).
2. Request (TITLE), Employee Name be given access to necessary FLETC and DAU course work in furtherance of the certificate.
3. Point of contact for this request is XXXXXXXX.

NAME
Resident Agent in Charge