
DATE: 12/08/2025
TO: COUNCIL - REGULAR CITY COUNCIL MEETING
SUBJECT: TRAINING REVIEW AND ACKNOWLEDGEMENT FORMS

Police:

Emp: Karen Neal
Training Title: TAPEIT Annual Conference (TX Assoc of Prop and Evidence Tech)
Date: October 27th, 2025 – October 31st, 2025

Emp: James Burris
Training Title: TML Conference
Date: October 29th, 2025 – October 31st, 2025

Emp: Derek Luna
Training Title: Field Training Officer
Date: November 4th, 2025 – November 6th, 2025

Emp: James Burris
Training Title: Simunition Instructor Course
Date: November 16th, 2025 – November 18th, 2025



CITY OF PORT LAVACA

TRAINING REVIEW & ACKNOWLEDGEMENT FORM

This form must be completed and submitted to your supervisor within 3 working days of returning from any training or conference that was paid for by the City.

EMPLOYEE NUMBER: 2320 EMPLOYEE NAME: KAREN NEAL

DEPARTMENT: Police TRAINING / CONFERENCE DATE(S): 10-27 - 10-31

TRAINING/ CONFERENCE TITLE: TAPEIT - Annual Conference

LOCATION: Galveston

1. Purpose of Training/ Conference

(Briefly explain the reason for attending and what the training was intended to accomplish)

To complete Train-the-Trainer preparation for teaching the Basic Evidence Certification Course, receive updated training on evidence management practices, improve courtroom-related skills, and network with evidence professionals statewide.

2. Summary of Activities or Topics Covered

(What sessions, classes, or workshops did you attend?)

Monday: Train-the-Trainer—curriculum structure, adult-learning methods, instructor responsibilities.

Tuesday: Guest speakers Richard Rennison, Kevin Petroff, and Greg Stube—leadership, legal updates, and resilience.

Wednesday: Inventories & Audits; Evidence Storage & Preservation; Courtroom Testimony.

Thursday: Assisted in teaching the Basic Evidence Certification course.

Friday: TAPEIT General Meeting and keynote by Jason Schechterle.

All Week: Networking with evidence custodians, instructors, and law enforcement partners.

3. Key Takeaways or Skills Learned

(What did you learn or gain from this experience?)

Increased readiness to teach the Basic Evidence Certification course using effective training and assessment methods.

Updated knowledge of audits, storage requirements, preservation practices, and courtroom testimony.

Leadership and professional insight gained from multiple guest speakers.

Reinforced the value of networking for sharing solutions and staying current with best practices.

EMPLOYEE SIGNATURE: 

DATE: 11/04/2025 **RECEIVED**

DEPARTMENT HEAD SIGNATURE: 

DATE: 11-4 **NOV 05 2025**

HR SIGNATURE: _____

DATE: _____ **CITY OF PORT LAVACA
CITY MANAGER**



CITY OF
PORT LAVACA

TRAINING REVIEW & ACKNOWLEDGEMENT FORM

This form must be completed and submitted to your supervisor within 3 working days of returning from any training or conference that was paid for by the City.

EMPLOYEE NUMBER: 2030 EMPLOYEE NAME: JAMES BURRIS

DEPARTMENT: Police TRAINING / CONFERENCE DATE(S): 10/29 - 10/31

TRAINING/ CONFERENCE TITLE: TML CONFERENCE

LOCATION: FORT WORTH, TX

1. Purpose of Training/ Conference

(Briefly explain the reason for attending and what the training was intended to accomplish)

GAINING UNDERSTANDING OF CITY ADMINISTRATION AND MANAGEMENT.

2. Summary of Activities or Topics Covered

(What sessions, classes, or workshops did you attend?)

- Leadership 101: 12 Principles of Municipal Impact
- Creating a leadership team for success: Building stronger, more effective leadership
- Collaboration with your Police Chief
- Value of Professional Associations
- Building an Effective Ethics Policy
- The Cost of Place; Fostering Fiscal Stewardship to Manage Community Assets

3. Key Takeaways or Skills Learned

(What did you learn or gain from this experience?)

- Leadership 101: 12 Principles of Municipal Impact
- Dr. Arturo Menefee
- Leadership Empowerment Strategies
- 1 set expectations
- Vision=plan=goals
- 2 be the truth
- Integrity- adherence to moral and ethical principles
- 3 have an attitude (in what we make of it)
- 4 be courageous (face/address situations in spite of fear)
- 5 intelligence (seek growth)...

EMPLOYEE SIGNATURE: JAMES BURRIS

DATE: 11/05/2025

DEPARTMENT HEAD SIGNATURE: [Signature]

DATE: 11-5-25

HR SIGNATURE: _____

DATE: _____

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NOV 05 2025
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CITY MANAGER



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TRAINING REVIEW & ACKNOWLEDGEMENT FORM

This form must be completed and submitted to your supervisor within 3 working days of returning from any training or conference that was paid for by the City.

EMPLOYEE NUMBER: 2280 EMPLOYEE NAME: DEREK LUNA

DEPARTMENT: PLPD TRAINING / CONFERENCE DATE(S): 11/4- 11/6

TRAINING/ CONFERENCE TITLE: FIELD TRAINING OFFICER

LOCATION: ROBERTSON COUNTY SHERIFF'S OFFICE

1. Purpose of Training/ Conference

(Briefly explain the reason for attending and what the training was intended to accomplish)

BE FTO CERTIFIED AND LEARN SKILLS IN BEING AN EFFICIENT FIELD TRAINING OFFICER.

2. Summary of Activities or Topics Covered

(What sessions, classes, or workshops did you attend?)

I ATTENDED THREE IN CLASSROOM TRAININGS.

3. Key Takeaways or Skills Learned

(What did you learn or gain from this experience?)

GOT FTO CERTIFIED, AND LEARNED HOW TO BE AN EFFICIENT FIELD TRAINING OFFICER.

EMPLOYEE SIGNATURE: DEREK LUNA

DATE: 11/11/2025

DEPARTMENT HEAD SIGNATURE: [Signature]

DATE: 11-11-25

HR SIGNATURE: _____

DATE: _____

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TRAINING REVIEW & ACKNOWLEDGEMENT FORM

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EMPLOYEE NUMBER: 2030 EMPLOYEE NAME: JAMES BURRIS

DEPARTMENT: Police TRAINING / CONFERENCE DATE(S): 11/16 - 11/18

TRAINING/ CONFERENCE TITLE: SIMUNITION INSTRUCTOR COURSE

LOCATION: FORT WORTH POLICE DEPARTMENT (BOB BOLEN)

1. Purpose of Training/ Conference

(Briefly explain the reason for attending and what the training was intended to accomplish)

THIS COURSE WAS TAKEN IN ORDER TO PROPERLY IDENTIFY AND CREATE SAFETY POLICY AND PROCEDURES FOR TRAINING OFFICERS IN SIMUNITION USE.

2. Summary of Activities or Topics Covered

(What sessions, classes, or workshops did you attend?)

SIMUNITION USE, SAFETY PROCEDURES, & PROPER COURSE DESIGN

3. Key Takeaways or Skills Learned

(What did you learn or gain from this experience?)

SAFETY PROCEDURES AND LIABILITY CONCERNS

EMPLOYEE SIGNATURE: JAMES BURRIS

DATE: 11/19/2025

DEPARTMENT HEAD SIGNATURE: [Signature]

DATE: 11-19-25

HR SIGNATURE: _____

DATE: _____

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