
DATE: 01/06/2026

TO: COUNCIL - REGULAR CITY COUNCIL MEETING

SUBJECT: TRAINING REVIEW AND ACKNOWLEDGEMENT FORMS

Police:

Emp: Leann Leal

Training Title: Street Survival

Date: December 15, 2025 – December 16, 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: 2250 EMPLOYEE NAME: LEANN LEAL

DEPARTMENT: PORT LAVACA POLICE DEPT. TRAINING / CONFERENCE DATE(S): 12/15-12/16

TRAINING/ CONFERENCE TITLE: STREET SURVIVAL

LOCATION: HUMBLE TX

1. Purpose of Training/ Conference

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

To focus on critical patrol tactics and officer safety.

2. Summary of Activities or Topics Covered

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

The TCOLE training reinforced situation awareness and sound decision-making during high- risk encounters in the field.

3. Key Takeaways or Skills Learned

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

Due to the sensitive nature of the material, specific content is not appropriate for public release.

EMPLOYEE SIGNATURE:  DATE: 01/06/2026

DEPARTMENT HEAD SIGNATURE: _____ DATE: _____

HR SIGNATURE:  DATE: _____

RECEIVED

JAN 06 2026