



This acknowledges that

has successfully passed the
**Wisconsin Flagging Handbook
Training Certification Course**

and is eligible to perform flagging operations on Wisconsin state-owned highways.

Instructor: _____ **Date:** _____

Expiration Date: _____
(2 years from training date)



This acknowledges that

has successfully passed the
**Wisconsin Flagging Handbook
Training Certification Course**

and is eligible to perform flagging operations on Wisconsin state-owned highways.

Instructor: _____ **Date:** _____

Expiration Date: _____
(2 years from training date)