



## Justification Letter: Request for Conference Training Approval

To: \_\_\_\_\_  
Title/Rank: \_\_\_\_\_  
Agency/Department: \_\_\_\_\_

From: \_\_\_\_\_  
Title/Rank: \_\_\_\_\_  
Date: \_\_\_\_\_

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**Subject: Request for Approval to Attend First Responder Mental Health & Wellness Conference**

Dear \_\_\_\_\_,

I respectfully request approval to attend the **First Responder Mental Health & Wellness Conference**, hosted by **1st Responder Conferences**, in partnership with public safety agencies and wellness organizations nationwide.

The conference focuses on improving health, resilience, performance, and long-term career sustainability for first responders. It provides evidence-based training and resources aimed at reducing burnout, improving morale, and strengthening agency support systems.

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### Training Purpose

Attending this conference will allow me to:

- Gain practical tools to improve mental, emotional, and physical wellness.
- Learn current best practices for critical incident stress, trauma prevention, and recovery.

- Strengthen peer support, leadership communication, and agency wellness initiatives.
  - Network and exchange solutions with other departments across the country.
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## Benefits to Our Agency

This training supports our department by:

- Enhancing workforce resilience and reducing burnout and turnover.
  - Supporting proactive wellness policies, reducing liability, and improving performance.
  - Helping maintain a healthy, mission-ready workforce.
  - Strengthening morale, retention, and long-term career satisfaction.
  - Upon return, I will share training materials, takeaways, and resources with our command staff, wellness team, and/or department personnel.
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## Conference Credentials

- **1st Responder Conferences** has organized **over 60 conferences** since 2016, training thousands of first responders, clinicians, and agency leaders.
  - Attendees receive a **certificate of attendance**; most conferences provide **additional credits for Law Enforcement, Fire, and Clinical professionals**.
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## Estimated Cost

Expense	Cost
Registration	\$ _____ —
Travel/Lodging	\$ _____ —

Miscellaneous/Per Diem \$ \_\_\_\_\_

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**Total Estimate** \$ \_\_\_\_\_

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*Note: If applicable, our agency may choose to register as an Endorsing Agency, which provides one free registration when contributing a raffle basket.*

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## Contact Information

For additional information or questions about the conference, please contact:

**Shawn Thomas, Founder**

**Email:** shawn@1strc.org

**Phone:** 206-841-6632