



South Carolina Criminal Justice Academy

South Carolina Criminal Justice Academy
Responses to Legislative Oversight Committee Questions
3/29/17

Contained within this binder are the responses to follow up questions requested from the Legislative Oversight Committee received March 21, 2017 by the South Carolina Criminal Justice Academy Listed below are the questions as presented:

TERM LIMITS

Please provide a list of pros and cons for setting term limits on individuals appointed to the Law Enforcement Training Council.

Please provide a proposed term limit that would allow enough time for those appointed to have an opportunity to learn the processes and provide input, while at the same time allowing for regular turnover and the opportunity for fresh ideas.

GRADUATION RATES

Please provide a list of five entities with the highest, and five entities with the lowest, basic training graduation rates during each of the last five years. Please include the total number of individuals who pass/do not pass with the graduation rate to provide the Subcommittee perspective.

Please provide a brief explanation of what the Academy believes the entities with the highest graduation rates are doing to obtain these high graduation rates.

Are there any written or physical tests that individuals must pass prior to being accepted into the Academy?

ADVANCED TRAINING COURSES

Are advance training courses only taught to those within the state or are there entities in other states that send their personnel to advanced training courses at the Academy?

What does the Academy do to ensure it is teaching the most current techniques and classes?

FORMS

Please provide a list of all the forms a law enforcement entity may have to complete and provide to the Academy during any given year? E.g., Personnel Change in Status, MRN, etc.)

For each of the forms listed in response to the prior question, does the entity submit the information for the required form by typing the information online in the web form, or must the entity complete and submit a paper copy?

DE-CERTIFICATION/DISCIPLINE POLICIES

Are there other states that providing training to the individual(s) at law enforcement entities that are responsible for issuing discipline at the entity, similar to how the Academy provides training for individuals that serve as instructors for certain classes at law enforcement entities?

Does the Academy believe providing uniform training to the individuals(s) at law enforcement entities that determine whether or not a Notification of Separation Due to Misconduct is submitted may foster consistency in the type of facts that lead submitting these forms? Why or why not?

South Carolina Law Enforcement Training Council - Established March 29, 2007 - Eleven Members

ORIGINAL LETC		Jan. 2008	Jly 2008	Ja. 2008	Nov. 2009	Ap. 2010	Oct-Dec 2010	Jan. 2011	Feb. 2011	June. 2011	June, 2012	Nov - Dec. 2011	April. 2013	Sept. 2013	Oct. 2013	Feb. 2014	April. 2014	Jan. 2015	Dec. 2016	Jan. 2017	CURRENT LETC
Attorney General's Office	HENRY McMASTER						<i>McMaster resigns to run for Gov.</i>	AG ALAN WILSON													AG Alan Wilson
SC Law Enforcement Division	ROBERT STEWART	<i>Robert Stewart retires / Mark Keel, Interim</i>	DIR. REGGIE LLOYD							<i>Reggie Lloyd resigns</i>											Chief Mark Keel
SC Probation Parole and Pardon	SAM GLOVER						<i>Sam Glover retires</i>	<i>Kela Thomas Interim Dir.</i>	KELA THOMAS Director									<i>Kela Thomas resigns/</i>	JERRY ADGER, Director		Director Jerry Adger
SC Dept. of Corrections	JON OZMINT						<i>Jon Ozmint resigns</i>	WILLAM BYARS, Director					<i>William Byars retires</i>	DIR. BRYAN STIRLING							Director Bryan Stirling
SC Dept. Natural Resources	JOHN FRAMPTON			<i>John Franpton retire s/</i>				ALVIN TAYLOR, DIRECTOR													Director Alvin Taylor
SC Dept. of Public Safety	JIM SCHWEITZER		<i>Jim Scheitzer retires/</i>							CHIEF MARK KEEL to SLED		DIR. LEROY SMITH									Director Leroy Smith

Municipality - Population less than ten thousand	PATTY PATTERSON Sumter PD										<i>Patty Patterson retires</i>		JOHN THOMAS North Augusta							Chief John Thomas
Municipality - Population more than ten thousand	JOHN THOMAS Clinton DPS				John Thomas relocated to NORTH Augusta	RICHARD NAGY Hardeeville PD									<i>Richard Nagy resigns</i>	ROBIN MORSE Clinton DPS				Chief Robin Morse
County Sheriff - Population less than fifty thousand	JASON BOOTH Saluda CO SO										Jason Booth resigns /	SHERIFF EDWARD DARNELL - Bamberg CO SO						<i>Edward Darnell - Retires</i>	BARRY FAILE Lancaster CO SO	Sheriff Barry Faile
County Sheriff - Population less more fifty thousand	BRUCE BRYANT York CO SO																	<i>Bruce Bryant - RETIRES</i>	LEE FOSTER Newberry CO SO	Sheriff Lee Foster
Detention Director County/ Multi-jurisdictional jail	FLORA BOYD Kershaw Cty Det. Center				<i>Flora Boyd retires /</i> RONALDO MYERS Alvin S. Glenn															Director Ronaldo Myers

Graduation Rates by Agency BLE 613-657 (January 1, 2014 - December 31, 2016)

Agency	Departed	Graduated	Incomplete	Departed	Graduated
Greenwood Co. Detention Center	1			100.00%	0.00%
Summerton Police Dept.	2			100.00%	0.00%
Bowman Police Dept.	1			100.00%	0.00%
Jonesville Police Dept.	2			100.00%	0.00%
Edisto Beach Police Dept.	1			100.00%	0.00%
Pamplico Police Dept.	1			100.00%	0.00%
Cowpens Police Dept.	1			100.00%	0.00%
SC Attorney General's Office	1			100.00%	0.00%
Allendale Police Dept.	4			100.00%	0.00%
SC State University Police Department				1	0.00%
Bishopville Police Dept.	7	1		87.50%	12.50%
Cottageville Police Dept.	6	1		85.71%	14.29%
Wellford Police Dept.	4	1		80.00%	20.00%
Williamsburg Co. Sheriff's Office	3	1		75.00%	25.00%
Allendale Co. Sheriff's Office	3	1		75.00%	25.00%
Ninety Six Police Dept.	3	1		75.00%	25.00%
Atlantic Beach Police Dept.	5	2		71.43%	28.57%
Wofford College Public Safety	2	1		66.67%	33.33%
Chesnee Police Dept.	2	1		66.67%	33.33%
McCormick Co. Sheriff's Office	2	1		66.67%	33.33%
Prosperity Police Dept.	2	1		66.67%	33.33%
Great Falls Police Dept.	2	1		66.67%	33.33%
Fairfax Police Dept.	2	1		66.67%	33.33%
Andrews Police Dept.	4	2		66.67%	33.33%
Edgefield Police Dept.	4	2		66.67%	33.33%
Lee Co. Sheriff's Office	6	3		66.67%	33.33%
SC State Ports Authority Police Dept.	3	2		60.00%	40.00%
Calhoun Falls Police Dept.	3	2		60.00%	40.00%
Denmark Police Dept.	3	2		60.00%	40.00%

Hemingway Police Dept.	3	2	60.00%	40.00%
Lake View Police Dept.	3	2	60.00%	40.00%
Williston Police Dept.	3	2	60.00%	40.00%
Hampton Co. Sheriff's Office	7	5	58.33%	41.67%
Chester Police Dept.	11	8	57.89%	42.11%
Orangeburg Co. Sheriff's Office	9	8	52.94%	47.06%
Iva Police Dept.	1	1	50.00%	50.00%
Johnsonville Police Dept.	1	1	50.00%	50.00%
Blacksburg Police Dept.	1	1	50.00%	50.00%
Landrum Police Dept.	1	1	50.00%	50.00%
Marlboro Co. Sheriff's Office	1	1	50.00%	50.00%
Denmark Tech College Public Safety	1	1	50.00%	50.00%
Ehrhardt Police Dept.	1	1	50.00%	50.00%
St. Stephen Police Dept.	1	1	50.00%	50.00%
Citadel Public Safety	1	1	50.00%	50.00%
Darlington Co. Detention Center	1	1	50.00%	50.00%
Greenville Tech. College Campus Police	1	1	50.00%	50.00%
Anderson Co. Detention Center	1	1	50.00%	50.00%
Whitmire Police Dept.	1	1	50.00%	50.00%
Estill Police Dept.	2	2	50.00%	50.00%
Winnsboro Public Safety	2	2	50.00%	50.00%
Clarendon Co. Sheriff's Office	3	3	50.00%	50.00%
SC Forestry Commission	4	4	50.00%	50.00%
Kingstree Police Dept.	5	5	50.00%	50.00%
Lake City Police Dept.	5	5	50.00%	50.00%
Laurens Police Dept.	6	6	50.00%	50.00%
Beaufort Police Dept.	9	9	50.00%	50.00%
Chester Co. Sheriff's Office	7	8	46.67%	53.33%
SC Dept. of Juvenile Justice Police Dept	7	8	46.67%	53.33%
Loris Police Dept.	5	6	45.45%	54.55%
Francis Marion University Public Safety	4	5	44.44%	55.56%
Johnston Police Dept.	3	4	42.86%	57.14%
Manning Police Dept.	3	4	42.86%	57.14%
Ware Shoals Police Dept.	3	4	42.86%	57.14%

Chesterfield Co. Sheriff's Office	3	4		42.86%	57.14%
Abbeville Police Dept.	3	4		42.86%	57.14%
Marion Police Dept.	6	8		42.86%	57.14%
Hampton Police Dept.	2	3		40.00%	60.00%
Pageland Police Dept.	2	3		40.00%	60.00%
USC Upstate Police Department	2	3		40.00%	60.00%
Calhoun Co. Sheriff's Office	4	6		40.00%	60.00%
Moncks Corner Police Dept.	4	6		40.00%	60.00%
Lancaster Police Dept.	8	12		40.00%	60.00%
Hanahan Police Dept.	5	8		38.46%	61.54%
Darlington Co. Sheriff's Office	8	13		38.10%	61.90%
College of Charleston Public Safety	3	5		37.50%	62.50%
Camden Police Dept.	3	5		37.50%	62.50%
Lexington Co. Health Services-Dept.of DPS	3	7	1	27.27%	63.64%
Fairfield Co. Sheriff's Office	4	7		36.36%	63.64%
Bennettsville Police Dept.	4	7		36.36%	63.64%
Florence Police Dept.	10	18		35.71%	64.29%
Florence Co. Sheriff's Office	7	13		35.00%	65.00%
Aynor Police Dept.	1	2		33.33%	66.67%
Columbia Metro Airport Department of Public Safety	1	2		33.33%	66.67%
Seneca Police Dept.	1	2		33.33%	66.67%
McCormick Police Dept.	1	2		33.33%	66.67%
Blackville Police Dept.	1	2		33.33%	66.67%
Inman Police Dept.	1	2		33.33%	66.67%
Pickens Police Dept.	2	4		33.33%	66.67%
Harleyville Police Dept.	2	4		33.33%	66.67%
Dillon Co. Sheriff's Office	2	4		33.33%	66.67%
Gaffney Police Dept.	4	8		33.33%	66.67%
Oconee Co. Sheriff's Office	5	10		33.33%	66.67%
Clemson University Police Dept.	7	14		33.33%	66.67%
SC Probation, Parole & Pardon Services	47	105		30.92%	69.08%
Newberry Co. Sheriff's Office	4	9		30.77%	69.23%
Colleton Co. Sheriff's Office	7	16		30.43%	69.57%
Georgetown Co. Sheriff's Office	7	16		30.43%	69.57%

Batesburg/Leesville Police Dept.	3	7		30.00%	70.00%
Trident Tech College Public Safety	2	5		28.57%	71.43%
Barnwell Co. Sheriff's Office	2	5		28.57%	71.43%
Walterboro Police Department	2	5		28.57%	71.43%
SC Dept. of Mental Health	18	47		27.69%	72.31%
SC DHEC	2	8	1	18.18%	72.73%
Santee Police Dept.	1	3		25.00%	75.00%
Bamberg Police Dept.	1	3		25.00%	75.00%
Wagener Police Dept.	1	3		25.00%	75.00%
Holly Hill Police Dept.	1	3		25.00%	75.00%
Walhalla Police Dept.	1	3		25.00%	75.00%
Bluffton Police Dept.	2	6		25.00%	75.00%
Easley Police Dept.	2	6		25.00%	75.00%
Jasper Co. Sheriff's Office	3	9		25.00%	75.00%
Clinton Dept. of Public Safety	3	10		23.08%	76.92%
Newberry Police Dept.	3	10		23.08%	76.92%
Spartanburg Co. Sheriff's Office	11	37		22.92%	77.08%
Mauldin Police Dept.	5	17		22.73%	77.27%
Sumter Co. Sheriff's Office	5	17		22.73%	77.27%
Mullins Police Dept.	2	7		22.22%	77.78%
Greenwood Co. Sheriff's Office	2	7		22.22%	77.78%
Lexington Co. Sheriff's Office	7	25		21.88%	78.13%
Honea Path Police Dept.	1	4		20.00%	80.00%
St. George Police Dept.	1	4		20.00%	80.00%
Cheraw Police Dept.	2	8		20.00%	80.00%
Laurens Co. Sheriff's Office	3	12		20.00%	80.00%
Anderson Co. Sheriff's Office	10	40		20.00%	80.00%
Greenwood Police Dept.	3	13		18.75%	81.25%
Lancaster Co. Sheriff's Office	5	22		18.52%	81.48%
Cayce Public Safety	2	9		18.18%	81.82%
Horry Co. Sheriff's Office	2	9		18.18%	81.82%
Sumter Police Dept.	6	27		18.18%	81.82%
North Charleston Police Dept.	12	59		16.90%	83.10%
Pickens Co. Sheriff's Office	1	5		16.67%	83.33%

Latta Police Dept.	1	5	16.67%	83.33%
J. Reuben Long Detention Center	1	5	16.67%	83.33%
Surfside Beach Police Department	2	10	16.67%	83.33%
Columbia Police Dept.	14	74	15.91%	84.09%
Anderson Police Dept.	5	29	14.71%	85.29%
Dillon Police Dept.	1	6	14.29%	85.71%
Hartsville Police Dept.	1	6	14.29%	85.71%
Cherokee Co. Sheriff's Office	1	6	14.29%	85.71%
Orangeburg Public Safety	3	18	14.29%	85.71%
Greenville Police Dept.	6	36	14.29%	85.71%
Richland Co. Sheriff's Office	18	109	14.17%	85.83%
Dorchester Co. Sheriff's Office	2	13	13.33%	86.67%
Kershaw Co. Sheriff's Office	2	13	13.33%	86.67%
Rock Hill Police Dept.	6	40	13.04%	86.96%
SC Department of Public Safety	37	256	12.63%	87.37%
USC Beaufort Police Dept.	1	7	12.50%	87.50%
Myrtle Beach Police Dept.	8	60	11.76%	88.24%
Greenville Co. Sheriff's Office	12	91	11.65%	88.35%
Spartanburg Police Department	5	38	11.63%	88.37%
Charleston Co. Sheriff's Office	5	38	11.63%	88.37%
S.L.E.D.	4	31	11.43%	88.57%
Port Royal Police Dept.	1	8	11.11%	88.89%
Forest Acres Police Dept.	1	8	11.11%	88.89%
Charleston City Police Dept.	12	103	10.43%	89.57%
Horry Co. Police Dept.	3	26	10.34%	89.66%
Georgetown Police Dept.	1	9	10.00%	90.00%
York Co. Sheriff's Office	4	36	10.00%	90.00%
Mt. Pleasant Police Dept.	4	38	9.52%	90.48%
Aiken Co. Sheriff's Office	3	29	9.38%	90.63%
Greer Police Dept.	1	10	9.09%	90.91%
Berkeley Co. Sheriff's Office	3	32	8.57%	91.43%
Beaufort Co. Sheriff's Office	3	35	7.89%	92.11%
Conway Police Dept.	1	12	7.69%	92.31%
North Myrtle Beach Public Safety	1	12	7.69%	92.31%

Goose Creek Police Dept.	1	17	5.56%	94.44%
West Columbia Police Dept.	1	17	5.56%	94.44%
Yemassee Police Dept.		1	0.00%	100.00%
Duncan Police Dept.		1	0.00%	100.00%
SC Department of Revenue		1	0.00%	100.00%
Hardeeville Police Dept.		1	0.00%	100.00%
Bonneau Police Dept.		1	0.00%	100.00%
Sullivans Island Police Dept.		1	0.00%	100.00%
Timmons ville Police Dept.		1	0.00%	100.00%
Dorchester Co. Detention Center		1	0.00%	100.00%
Union Co. Sheriff's Office		1	0.00%	100.00%
USC Aiken Police Department		1	0.00%	100.00%
Isle of Palms Police Dept.		1	0.00%	100.00%
Walterboro Fire Department		1	0.00%	100.00%
West Union Police Dept.		1	0.00%	100.00%
Westminster Police Dept.		1	0.00%	100.00%
Campobello Police Dept.		1	0.00%	100.00%
Saluda Police Dept.		2	0.00%	100.00%
Winthrop University Police Department		2	0.00%	100.00%
Edgefield Co. Sheriff's Office		2	0.00%	100.00%
Belton Police Dept.		2	0.00%	100.00%
SC Dept. of Corrections		2	0.00%	100.00%
Liberty Police Dept.		2	0.00%	100.00%
Medical University of S.C. Public Safety		2	0.00%	100.00%
Clemson Police Dept.		2	0.00%	100.00%
Pacolet Police Dept.		2	0.00%	100.00%
Darlington Police Dept.		3	0.00%	100.00%
Abbeville Co. Sheriff's Office		3	0.00%	100.00%
Clover Police Dept.		3	0.00%	100.00%
Fort Mill Police Dept.		3	0.00%	100.00%
Saluda Co. Sheriff's Office		3	0.00%	100.00%
Lexington Police Dept.		3	0.00%	100.00%
North Augusta Public Safety		4	0.00%	100.00%
Simpsonville Police Dept.		4	0.00%	100.00%

Greenville Hosp. System Law Enf. Svc.	4	0.00%	100.00%
Central Police Dept.	4	0.00%	100.00%
Folly Beach Public Safety	4	0.00%	100.00%
Centerra-SRS Law Enforcement Department	4	0.00%	100.00%
Woodruff Police Dept.	4	0.00%	100.00%
Travelers Rest Police Dept.	5	0.00%	100.00%
York Police Dept.	5	0.00%	100.00%
Irmo Police Dept.	5	0.00%	100.00%
Springdale Police Dept.	5	0.00%	100.00%
Laurens Co. Sheriff's Office - Jail Division	6	0.00%	100.00%
Union Public Safety	6	0.00%	100.00%
Barnwell Police Dept.	7	0.00%	100.00%
Fountain Inn Police Dept.	7	0.00%	100.00%
Marion Co. Sheriff's Office	8	0.00%	100.00%
Tega Cay Police Dept.	10	0.00%	100.00%
USC Law Enforcement & Safety	12	0.00%	100.00%
Summerville Police Dept.	15	0.00%	100.00%
Aiken Public Safety	17	0.00%	100.00%
SC Dept. of Natural Resources	26	0.00%	100.00%

Basic Law Enforcement Graduation Rates by Agency

BLE 613-657 (January 1, 2014 to December 31, 2016)

Row Labels	Column Labels							Total Count of Student Status	Total Count of Student Status2
	Count of Student Status			Count of Student Status2					
	Departed	Graduated	Incomplete	(Departed	Graduated	Incomplete	(blank)		
Abbeville Co. Sheriff's Office		3		0.00%	100.00%	0.00%	0.00%	3	100.00%
Abbeville Police Dept.	3	4		42.86%	57.14%	0.00%	0.00%	7	100.00%
Aiken Co. Sheriff's Office	3	29		9.38%	90.63%	0.00%	0.00%	32	100.00%
Aiken Public Safety		17		0.00%	100.00%	0.00%	0.00%	17	100.00%
Allendale Co. Sheriff's Office	3	1		75.00%	25.00%	0.00%	0.00%	4	100.00%
Allendale Police Dept.	4			100.00%	0.00%	0.00%	0.00%	4	100.00%
Anderson Co. Detention Center	1	1		50.00%	50.00%	0.00%	0.00%	2	100.00%
Anderson Co. Sheriff's Office	10	40		20.00%	80.00%	0.00%	0.00%	50	100.00%
Anderson Police Dept.	5	29		14.71%	85.29%	0.00%	0.00%	34	100.00%
Andrews Police Dept.	4	2		66.67%	33.33%	0.00%	0.00%	6	100.00%
Atlantic Beach Police Dept.	5	2		71.43%	28.57%	0.00%	0.00%	7	100.00%
Aynor Police Dept.	1	2		33.33%	66.67%	0.00%	0.00%	3	100.00%
Bamberg Police Dept.	1	3		25.00%	75.00%	0.00%	0.00%	4	100.00%
Barnwell Co. Sheriff's Office	2	5		28.57%	71.43%	0.00%	0.00%	7	100.00%
Barnwell Police Dept.		7		0.00%	100.00%	0.00%	0.00%	7	100.00%
Batesburg/Leesville Police Dept.	3	7		30.00%	70.00%	0.00%	0.00%	10	100.00%
Beaufort Co. Sheriff's Office	3	35		7.89%	92.11%	0.00%	0.00%	38	100.00%
Beaufort Police Dept.	9	9		50.00%	50.00%	0.00%	0.00%	18	100.00%
Belton Police Dept.		2		0.00%	100.00%	0.00%	0.00%	2	100.00%
Bennettsville Police Dept.	4	7		36.36%	63.64%	0.00%	0.00%	11	100.00%
Berkeley Co. Sheriff's Office	3	32		8.57%	91.43%	0.00%	0.00%	35	100.00%
Bishopville Police Dept.	7	1		87.50%	12.50%	0.00%	0.00%	8	100.00%
Blacksburg Police Dept.	1	1		50.00%	50.00%	0.00%	0.00%	2	100.00%
Blackville Police Dept.	1	2		33.33%	66.67%	0.00%	0.00%	3	100.00%
Bluffton Police Dept.	2	6		25.00%	75.00%	0.00%	0.00%	8	100.00%
Bonneau Police Dept.		1		0.00%	100.00%	0.00%	0.00%	1	100.00%
Bowman Police Dept.	1			100.00%	0.00%	0.00%	0.00%	1	100.00%
Calhoun Co. Sheriff's Office	4	6		40.00%	60.00%	0.00%	0.00%	10	100.00%
Calhoun Falls Police Dept.	3	2		60.00%	40.00%	0.00%	0.00%	5	100.00%
Camden Police Dept.	3	5		37.50%	62.50%	0.00%	0.00%	8	100.00%
Campobello Police Dept.		1		0.00%	100.00%	0.00%	0.00%	1	100.00%
Cayce Public Safety	2	9		18.18%	81.82%	0.00%	0.00%	11	100.00%
Centerra-SRS Law Enforcement Department		4		0.00%	100.00%	0.00%	0.00%	4	100.00%
Central Police Dept.		4		0.00%	100.00%	0.00%	0.00%	4	100.00%
Charleston City Police Dept.	12	103		10.43%	89.57%	0.00%	0.00%	115	100.00%
Charleston Co. Sheriff's Office	5	38		11.63%	88.37%	0.00%	0.00%	43	100.00%
Cheraw Police Dept.	2	8		20.00%	80.00%	0.00%	0.00%	10	100.00%

Cherokee Co. Sheriff's Office	1	6	14.29%	85.71%	0.00%	0.00%	7	100.00%
Chesnee Police Dept.	2	1	66.67%	33.33%	0.00%	0.00%	3	100.00%
Chester Co. Sheriff's Office	7	8	46.67%	53.33%	0.00%	0.00%	15	100.00%
Chester Police Dept.	11	8	57.89%	42.11%	0.00%	0.00%	19	100.00%
Chesterfield Co. Sheriff's Office	3	4	42.86%	57.14%	0.00%	0.00%	7	100.00%
Citadel Public Safety	1	1	50.00%	50.00%	0.00%	0.00%	2	100.00%
Clarendon Co. Sheriff's Office	3	3	50.00%	50.00%	0.00%	0.00%	6	100.00%
Clemson Police Dept.		2	0.00%	100.00%	0.00%	0.00%	2	100.00%
Clemson University Police Dept.	7	14	33.33%	66.67%	0.00%	0.00%	21	100.00%
Clinton Dept. of Public Safety	3	10	23.08%	76.92%	0.00%	0.00%	13	100.00%
Clover Police Dept.		3	0.00%	100.00%	0.00%	0.00%	3	100.00%
College of Charleston Public Safety	3	5	37.50%	62.50%	0.00%	0.00%	8	100.00%
Colleton Co. Sheriff's Office	7	16	30.43%	69.57%	0.00%	0.00%	23	100.00%
Columbia Metro Airport Department of Public Safety	1	2	33.33%	66.67%	0.00%	0.00%	3	100.00%
Columbia Police Dept.	14	74	15.91%	84.09%	0.00%	0.00%	88	100.00%
Conway Police Dept.	1	12	7.69%	92.31%	0.00%	0.00%	13	100.00%
Cottageville Police Dept.	6	1	85.71%	14.29%	0.00%	0.00%	7	100.00%
Cowpens Police Dept.	1		100.00%	0.00%	0.00%	0.00%	1	100.00%
Darlington Co. Detention Center	1	1	50.00%	50.00%	0.00%	0.00%	2	100.00%
Darlington Co. Sheriff's Office	8	13	38.10%	61.90%	0.00%	0.00%	21	100.00%
Darlington Police Dept.		3	0.00%	100.00%	0.00%	0.00%	3	100.00%
Denmark Police Dept.	3	2	60.00%	40.00%	0.00%	0.00%	5	100.00%
Denmark Tech College Public Safety	1	1	50.00%	50.00%	0.00%	0.00%	2	100.00%
Dillon Co. Sheriff's Office	2	4	33.33%	66.67%	0.00%	0.00%	6	100.00%
Dillon Police Dept.	1	6	14.29%	85.71%	0.00%	0.00%	7	100.00%
Dorchester Co. Detention Center		1	0.00%	100.00%	0.00%	0.00%	1	100.00%
Dorchester Co. Sheriff's Office	2	13	13.33%	86.67%	0.00%	0.00%	15	100.00%
Duncan Police Dept.		1	0.00%	100.00%	0.00%	0.00%	1	100.00%
Easley Police Dept.	2	6	25.00%	75.00%	0.00%	0.00%	8	100.00%
Edgefield Co. Sheriff's Office		2	0.00%	100.00%	0.00%	0.00%	2	100.00%
Edgefield Police Dept.	4	2	66.67%	33.33%	0.00%	0.00%	6	100.00%
Edisto Beach Police Dept.	1		100.00%	0.00%	0.00%	0.00%	1	100.00%
Ehrhardt Police Dept.	1	1	50.00%	50.00%	0.00%	0.00%	2	100.00%
Estill Police Dept.	2	2	50.00%	50.00%	0.00%	0.00%	4	100.00%
Fairfax Police Dept.	2	1	66.67%	33.33%	0.00%	0.00%	3	100.00%
Fairfield Co. Sheriff's Office	4	7	36.36%	63.64%	0.00%	0.00%	11	100.00%
Florence Co. Sheriff's Office	7	13	35.00%	65.00%	0.00%	0.00%	20	100.00%
Florence Police Dept.	10	18	35.71%	64.29%	0.00%	0.00%	28	100.00%
Folly Beach Public Safety		4	0.00%	100.00%	0.00%	0.00%	4	100.00%
Forest Acres Police Dept.	1	8	11.11%	88.89%	0.00%	0.00%	9	100.00%
Fort Mill Police Dept.		3	0.00%	100.00%	0.00%	0.00%	3	100.00%
Fountain Inn Police Dept.		7	0.00%	100.00%	0.00%	0.00%	7	100.00%
Francis Marion University Public Safety	4	5	44.44%	55.56%	0.00%	0.00%	9	100.00%
Gaffney Police Dept.	4	8	33.33%	66.67%	0.00%	0.00%	12	100.00%

Georgetown Co. Sheriff's Office	7	16	30.43%	69.57%	0.00%	0.00%	23	100.00%
Georgetown Police Dept.	1	9	10.00%	90.00%	0.00%	0.00%	10	100.00%
Goose Creek Police Dept.	1	17	5.56%	94.44%	0.00%	0.00%	18	100.00%
Great Falls Police Dept.	2	1	66.67%	33.33%	0.00%	0.00%	3	100.00%
Greenville Co. Sheriff's Office	12	91	11.65%	88.35%	0.00%	0.00%	103	100.00%
Greenville Hosp. System Law Enf. Svc.		4	0.00%	100.00%	0.00%	0.00%	4	100.00%
Greenville Police Dept.	6	36	14.29%	85.71%	0.00%	0.00%	42	100.00%
Greenville Tech. College Campus Police	1	1	50.00%	50.00%	0.00%	0.00%	2	100.00%
Greenwood Co. Detention Center	1		100.00%	0.00%	0.00%	0.00%	1	100.00%
Greenwood Co. Sheriff's Office	2	7	22.22%	77.78%	0.00%	0.00%	9	100.00%
Greenwood Police Dept.	3	13	18.75%	81.25%	0.00%	0.00%	16	100.00%
Greer Police Dept.	1	10	9.09%	90.91%	0.00%	0.00%	11	100.00%
Hampton Co. Sheriff's Office	7	5	58.33%	41.67%	0.00%	0.00%	12	100.00%
Hampton Police Dept.	2	3	40.00%	60.00%	0.00%	0.00%	5	100.00%
Hanahan Police Dept.	5	8	38.46%	61.54%	0.00%	0.00%	13	100.00%
Hardeeville Police Dept.		1	0.00%	100.00%	0.00%	0.00%	1	100.00%
Harleyville Police Dept.	2	4	33.33%	66.67%	0.00%	0.00%	6	100.00%
Hartsville Police Dept.	1	6	14.29%	85.71%	0.00%	0.00%	7	100.00%
Hemingway Police Dept.	3	2	60.00%	40.00%	0.00%	0.00%	5	100.00%
Holly Hill Police Dept.	1	3	25.00%	75.00%	0.00%	0.00%	4	100.00%
Honea Path Police Dept.	1	4	20.00%	80.00%	0.00%	0.00%	5	100.00%
Horry Co. Police Dept.	3	26	10.34%	89.66%	0.00%	0.00%	29	100.00%
Horry Co. Sheriff's Office	2	9	18.18%	81.82%	0.00%	0.00%	11	100.00%
Inman Police Dept.	1	2	33.33%	66.67%	0.00%	0.00%	3	100.00%
Irmo Police Dept.		5	0.00%	100.00%	0.00%	0.00%	5	100.00%
Isle of Palms Police Dept.		1	0.00%	100.00%	0.00%	0.00%	1	100.00%
Iva Police Dept.	1	1	50.00%	50.00%	0.00%	0.00%	2	100.00%
J. Reuben Long Detention Center	1	5	16.67%	83.33%	0.00%	0.00%	6	100.00%
Jasper Co. Sheriff's Office	3	9	25.00%	75.00%	0.00%	0.00%	12	100.00%
Johnsonville Police Dept.	1	1	50.00%	50.00%	0.00%	0.00%	2	100.00%
Johnston Police Dept.	3	4	42.86%	57.14%	0.00%	0.00%	7	100.00%
Jonesville Police Dept.	2		100.00%	0.00%	0.00%	0.00%	2	100.00%
Kershaw Co. Sheriff's Office	2	13	13.33%	86.67%	0.00%	0.00%	15	100.00%
Kingstree Police Dept.	5	5	50.00%	50.00%	0.00%	0.00%	10	100.00%
Lake City Police Dept.	5	5	50.00%	50.00%	0.00%	0.00%	10	100.00%
Lake View Police Dept.	3	2	60.00%	40.00%	0.00%	0.00%	5	100.00%
Lancaster Co. Sheriff's Office	5	22	18.52%	81.48%	0.00%	0.00%	27	100.00%
Lancaster Police Dept.	8	12	40.00%	60.00%	0.00%	0.00%	20	100.00%
Landrum Police Dept.	1	1	50.00%	50.00%	0.00%	0.00%	2	100.00%
Latta Police Dept.	1	5	16.67%	83.33%	0.00%	0.00%	6	100.00%
Laurens Co. Sheriff's Office	3	12	20.00%	80.00%	0.00%	0.00%	15	100.00%
Laurens Co. Sheriff's Office - Jail Division		6	0.00%	100.00%	0.00%	0.00%	6	100.00%
Laurens Police Dept.	6	6	50.00%	50.00%	0.00%	0.00%	12	100.00%
Lee Co. Sheriff's Office	6	3	66.67%	33.33%	0.00%	0.00%	9	100.00%

Lexington Co. Health Services-Dept.of DPS	3	7	1	27.27%	63.64%	9.09%	0.00%	11	100.00%
Lexington Co. Sheriff's Office	7	25		21.88%	78.13%	0.00%	0.00%	32	100.00%
Lexington Police Dept.		3		0.00%	100.00%	0.00%	0.00%	3	100.00%
Liberty Police Dept.		2		0.00%	100.00%	0.00%	0.00%	2	100.00%
Loris Police Dept.	5	6		45.45%	54.55%	0.00%	0.00%	11	100.00%
Manning Police Dept.	3	4		42.86%	57.14%	0.00%	0.00%	7	100.00%
Marion Co. Sheriff's Office		8		0.00%	100.00%	0.00%	0.00%	8	100.00%
Marion Police Dept.	6	8		42.86%	57.14%	0.00%	0.00%	14	100.00%
Marlboro Co. Sheriff's Office	1	1		50.00%	50.00%	0.00%	0.00%	2	100.00%
Mauldin Police Dept.	5	17		22.73%	77.27%	0.00%	0.00%	22	100.00%
McCormick Co. Sheriff's Office	2	1		66.67%	33.33%	0.00%	0.00%	3	100.00%
McCormick Police Dept.	1	2		33.33%	66.67%	0.00%	0.00%	3	100.00%
Medical University of S.C. Public Safety		2		0.00%	100.00%	0.00%	0.00%	2	100.00%
Moncks Corner Police Dept.	4	6		40.00%	60.00%	0.00%	0.00%	10	100.00%
Mt. Pleasant Police Dept.	4	38		9.52%	90.48%	0.00%	0.00%	42	100.00%
Mullins Police Dept.	2	7		22.22%	77.78%	0.00%	0.00%	9	100.00%
Myrtle Beach Police Dept.	8	60		11.76%	88.24%	0.00%	0.00%	68	100.00%
Newberry Co. Sheriff's Office	4	9		30.77%	69.23%	0.00%	0.00%	13	100.00%
Newberry Police Dept.	3	10		23.08%	76.92%	0.00%	0.00%	13	100.00%
Ninety Six Police Dept.	3	1		75.00%	25.00%	0.00%	0.00%	4	100.00%
North Augusta Public Safety		4		0.00%	100.00%	0.00%	0.00%	4	100.00%
North Charleston Police Dept.	12	59		16.90%	83.10%	0.00%	0.00%	71	100.00%
North Myrtle Beach Public Safety	1	12		7.69%	92.31%	0.00%	0.00%	13	100.00%
Oconee Co. Sheriff's Office	5	10		33.33%	66.67%	0.00%	0.00%	15	100.00%
Orangeburg Co. Sheriff's Office	9	8		52.94%	47.06%	0.00%	0.00%	17	100.00%
Orangeburg Public Safety	3	18		14.29%	85.71%	0.00%	0.00%	21	100.00%
Pacolet Police Dept.		2		0.00%	100.00%	0.00%	0.00%	2	100.00%
Pageland Police Dept.	2	3		40.00%	60.00%	0.00%	0.00%	5	100.00%
Pamplico Police Dept.	1			100.00%	0.00%	0.00%	0.00%	1	100.00%
Pickens Co. Sheriff's Office	1	5		16.67%	83.33%	0.00%	0.00%	6	100.00%
Pickens Police Dept.	2	4		33.33%	66.67%	0.00%	0.00%	6	100.00%
Port Royal Police Dept.	1	8		11.11%	88.89%	0.00%	0.00%	9	100.00%
Prosperity Police Dept.	2	1		66.67%	33.33%	0.00%	0.00%	3	100.00%
Richland Co. Sheriff's Office	18	109		14.17%	85.83%	0.00%	0.00%	127	100.00%
Rock Hill Police Dept.	6	40		13.04%	86.96%	0.00%	0.00%	46	100.00%
S.L.E.D.	4	31		11.43%	88.57%	0.00%	0.00%	35	100.00%
Saluda Co. Sheriff's Office		3		0.00%	100.00%	0.00%	0.00%	3	100.00%
Saluda Police Dept.		2		0.00%	100.00%	0.00%	0.00%	2	100.00%
Santee Police Dept.	1	3		25.00%	75.00%	0.00%	0.00%	4	100.00%
SC Attorney General's Office	1			100.00%	0.00%	0.00%	0.00%	1	100.00%
SC Department of Public Safety	37	256		12.63%	87.37%	0.00%	0.00%	293	100.00%
SC Department of Revenue		1		0.00%	100.00%	0.00%	0.00%	1	100.00%
SC Dept. of Corrections		2		0.00%	100.00%	0.00%	0.00%	2	100.00%
SC Dept. of Juvenile Justice Police Dept	7	8		46.67%	53.33%	0.00%	0.00%	15	100.00%

SC Dept. of Mental Health	18	47		27.69%	72.31%	0.00%	0.00%	65	100.00%
SC Dept. of Natural Resources		26		0.00%	100.00%	0.00%	0.00%	26	100.00%
SC DHEC	2	8	1	18.18%	72.73%	9.09%	0.00%	11	100.00%
SC Forestry Commission	4	4		50.00%	50.00%	0.00%	0.00%	8	100.00%
SC Probation, Parole & Pardon Services	47	105		30.92%	69.08%	0.00%	0.00%	152	100.00%
SC State Ports Authority Police Dept.	3	2		60.00%	40.00%	0.00%	0.00%	5	100.00%
SC State University Police Department			1	0.00%	0.00%	100.00%	0.00%	1	100.00%
Seneca Police Dept.	1	2		33.33%	66.67%	0.00%	0.00%	3	100.00%
Simpsonville Police Dept.		4		0.00%	100.00%	0.00%	0.00%	4	100.00%
Spartanburg Co. Sheriff's Office	11	37		22.92%	77.08%	0.00%	0.00%	48	100.00%
Spartanburg Police Department	5	38		11.63%	88.37%	0.00%	0.00%	43	100.00%
Springdale Police Dept.		5		0.00%	100.00%	0.00%	0.00%	5	100.00%
St. George Police Dept.	1	4		20.00%	80.00%	0.00%	0.00%	5	100.00%
St. Stephen Police Dept.	1	1		50.00%	50.00%	0.00%	0.00%	2	100.00%
Sullivans Island Police Dept.		1		0.00%	100.00%	0.00%	0.00%	1	100.00%
Summerton Police Dept.	2			100.00%	0.00%	0.00%	0.00%	2	100.00%
Summerville Police Dept.		15		0.00%	100.00%	0.00%	0.00%	15	100.00%
Sumter Co. Sheriff's Office	5	17		22.73%	77.27%	0.00%	0.00%	22	100.00%
Sumter Police Dept.	6	27		18.18%	81.82%	0.00%	0.00%	33	100.00%
Surfside Beach Police Department	2	10		16.67%	83.33%	0.00%	0.00%	12	100.00%
Tega Cay Police Dept.		10		0.00%	100.00%	0.00%	0.00%	10	100.00%
Timmonsville Police Dept.		1		0.00%	100.00%	0.00%	0.00%	1	100.00%
Travelers Rest Police Dept.		5		0.00%	100.00%	0.00%	0.00%	5	100.00%
Trident Tech College Public Safety	2	5		28.57%	71.43%	0.00%	0.00%	7	100.00%
Union Co. Sheriff's Office		1		0.00%	100.00%	0.00%	0.00%	1	100.00%
Union Public Safety		6		0.00%	100.00%	0.00%	0.00%	6	100.00%
USC Aiken Police Department		1		0.00%	100.00%	0.00%	0.00%	1	100.00%
USC Beaufort Police Dept.	1	7		12.50%	87.50%	0.00%	0.00%	8	100.00%
USC Law Enforcement & Safety		12		0.00%	100.00%	0.00%	0.00%	12	100.00%
USC Upstate Police Department	2	3		40.00%	60.00%	0.00%	0.00%	5	100.00%
Wagener Police Dept.	1	3		25.00%	75.00%	0.00%	0.00%	4	100.00%
Walhalla Police Dept.	1	3		25.00%	75.00%	0.00%	0.00%	4	100.00%
Walterboro Fire Department		1		0.00%	100.00%	0.00%	0.00%	1	100.00%
Walterboro Police Department	2	5		28.57%	71.43%	0.00%	0.00%	7	100.00%
Ware Shoals Police Dept.	3	4		42.86%	57.14%	0.00%	0.00%	7	100.00%
Wellford Police Dept.	4	1		80.00%	20.00%	0.00%	0.00%	5	100.00%
West Columbia Police Dept.	1	17		5.56%	94.44%	0.00%	0.00%	18	100.00%
West Union Police Dept.		1		0.00%	100.00%	0.00%	0.00%	1	100.00%
Westminster Police Dept.		1		0.00%	100.00%	0.00%	0.00%	1	100.00%
Whitmire Police Dept.	1	1		50.00%	50.00%	0.00%	0.00%	2	100.00%
Williamsburg Co. Sheriff's Office	3	1		75.00%	25.00%	0.00%	0.00%	4	100.00%
Williston Police Dept.	3	2		60.00%	40.00%	0.00%	0.00%	5	100.00%
Winnsboro Public Safety	2	2		50.00%	50.00%	0.00%	0.00%	4	100.00%
Winthrop University Police Department		2		0.00%	100.00%	0.00%	0.00%	2	100.00%

Wofford College Public Safety	2	1	66.67%	33.33%	0.00%	0.00%	3	100.00%
Woodruff Police Dept.		4	0.00%	100.00%	0.00%	0.00%	4	100.00%
Yemassee Police Dept.		1	0.00%	100.00%	0.00%	0.00%	1	100.00%
York Co. Sheriff's Office	4	36	10.00%	90.00%	0.00%	0.00%	40	100.00%
York Police Dept.		5	0.00%	100.00%	0.00%	0.00%	5	100.00%
(blank)			#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		#DIV/0!
Grand Total	673	2427	21.69%	78.21%	0.10%	0.00%	3103	100.00%

South Carolina Highway Patrol Basic Training Program

Pre-Academy Orientation/Indoctrination – Three weeks

The SCDPS Pre-Academy is designed to properly prepare the Trooper Trainee to successfully complete the SC Criminal Justice Academy. During this three week phase, Trooper Trainees are exposed to a highly autocratic paramilitary environment. The objective of this type of environment is to convey an established chain of command, strict adherence to the rules and promote self-discipline.

- SCDPS Policy and Procedures – Trooper Trainees are indoctrinated to SCDPS policies and procedures.
- Firearms – Trooper Trainees are given firearms instruction with an emphasis placed on basic weapons handling, drawing skills, and marksmanship fundamentals.
- Driving – Trooper Trainees are given hands on experience driving a full size police vehicle and exposed to several different driving courses and techniques.
- Defensive Tactics – Trooper Trainees are introduced to defensive tactics with an emphasis placed on patterns of movement, tactical handcuffing, relative positioning, and weapon retention and force continuum issues.
- Physical Training – Trooper Trainees will participate in daily physical training sessions designed to develop cardiovascular endurance and muscular strength. It is also designed to build mental and physical toughness. It focuses on team building and esprit de corps.



After reviewing our applicants, we schedule them to run the SCCJA PAT course. When an applicant passes the PAT course, they must fill out a background questionnaire. After the background questionnaire is complete, we review it for any automatic disqualifiers, such as criminal record, specific drug usage. When we determine the applicant is successful after the background questionnaire, they may take the National Police Officer Selection Test (P.O.S.T.) or the National Correction Officer Selection Test (C.O.S.T.). The minimum score on either test is 70%. If the applicant fails the PAT, they have to wait 30 days before they may attempt the course again. If the applicant fails either written test, they will have to wait 90 days before they may re-take the test. When the applicant has successfully completed these tasks, a background investigator is assigned to review their file. If anything that disqualifies is found, they are sent a rejection letter. If the applicant passes the background, they are invited to an interview with 5 board members that consist of, professional standards unit (4) people and a supervisor from the patrol division. A vote of 3 or more must be passed in order for the applicant to be sent to see the Major and the Sheriff for a final interview. If the applicant passes the interview with the Sheriff, he gives them a conditional offer of employment. This means the applicant must pass a drug screen and a psychological exam. Once all test are completed and the applicant passes, they will be sent to the professional standards unit for pre-academy training. This consists of firearms familiarization and qualification, defensive tactics and driving.



Mount Pleasant Police Department
Pre-Academy Training Curriculum

New Employee Orientation	24 hours
Physical Fitness	48 hours
Firearms	30 hours
Driver Training	30 hours
Defensive Tactics	30 hours
Ethics	16 hours
Bias Based Policing	2 hours
NCIC Security and Awareness	4 hours
Incident Command System	10 hours
Blood Borne Pathogens	4 hours
Policy Review	24 hours
Academy Registration and Orientation	10 hours
Total	232 hours

Aiken Department of Public Safety
Patrol "Rookie" Training Outline

Prior to assignment to a formal field training program, all newly sworn officers will receive training by Department Instructors in the following topical areas, including pertinent Department Policies and Procedures.

<p>I. Legals Overview</p> <ul style="list-style-type: none"> A. Role and Authority (Department Policy 101.2.6) B. Constitutional Law C. Probable Cause (Department Policy 101.2.5) D. Laws of Arrest (Department Policy 101.2.5) E. Search and Seizure (Department Policy 101.2.4) F. Interviews and Interrogations (Department Policy 101.2.3) G. Bias Based Profiling (Department Policy 101.2.9) H. State Law J. City Ordinances 	<p>16 Hours</p> <p><i>SCCJA Basic Manual Mod I</i></p>
<p>II. Traffic Law (Department Policy 661.1)</p> <ul style="list-style-type: none"> A. Licensing and Registrations B. Insurance Laws C. Moving Violations D. Driving under the Influence (Department Policy 661.1.11) E. Alcohol Consumption by Drivers under Age 21 (Department Policy 661.1.12) F. Equipment Violations G. Other 	<p>8 Hours</p> <p><i>SCCJA Basic Manual Mod II</i></p>
<p>III. Biased-Based Profiling (Department Policy 101.2.9)</p>	<p>1 Hour</p> <p><i>In the Line of Duty Video & LP</i></p>
<p>IV. Traffic Collision Management (Department Policy 661.2)</p> <ul style="list-style-type: none"> A. Non-injury B. Injury C. Fatality D. Collision Reports E. Towing Procedures (Department Policy 661.4.3) 	<p>8 Hours</p> <p><i>SCCJA Basic Manual Mod II</i></p>
<p>V. Juvenile Procedures</p> <ul style="list-style-type: none"> A. Juvenile Operations (Department Policy 444) B. Juvenile Records (Department Policy 444.1) C. School Liaison (Department Policy 444.2.4) 	<p>8 Hours</p> <p><i>SCCJA Basic Manual Mod I</i></p>

Patrol "Rookie" Training Outline

<p>VI. Specific Crime Management (by responding patrol officers)</p> <ul style="list-style-type: none">A. AssaultsB. ShopliftingC. Criminal Sexual Conduct (Department Policies 241.4 & 241.5)D. BurglaryE. RobberyF. HomicideG. SuicidesH. Child/Elder AbuseJ. Others<ul style="list-style-type: none">1. Alcohol Violations2. Larceny3. Trespass4. Miscellaneous	<p>8 Hours</p> <p><i>LP on File</i></p>
<p>VII. Investigations (Department Policy 342)</p> <ul style="list-style-type: none">A. Collection and Preservation of Evidence (Department Policy 383)B. Property and Evidence Control (Department Policy 384)C. Criminal Intelligence (Department Policy 342.1)D. Vehicle Seizures (Department Policy 384.1)E. Interviewing Techniques (Department Policy 101.2.3)<ul style="list-style-type: none">1. Suspects2. Witnesses3. Confessions	<p>4 Hours</p> <p><i>LP on File</i></p>

Patrol "Rookie" Training Outline

<p>VIII.Narcotics Unit (Department Policy 343)</p> <ul style="list-style-type: none"> A. Surveillance, Undercover, and Decoy Operations (Department Policy 343.1) B. Raid Operations (Department Policy 343.2) 	<p>4 Hours</p> <p><i>SCCJA Basic Manual Mod II</i></p>
<p>IX.Processing the Suspect (Department Policy 101.2.5)</p> <ul style="list-style-type: none"> A. Booking Procedures B. Fingerprinting C. Photographing D. Processing computer-generated warrants 	<p>4 Hours</p> <p><i>SCCJA Basic Manual Mod III + LP on File</i></p>
<p>X. Patrol Techniques</p> <ul style="list-style-type: none"> A. Patrolling B. Field Interviews (Department Policy 241.2.4) C. Incident Response Procedures (Department Policies 241.2.1 & 241.6) D. Bank Alarm Response E. Public Safety Checkpoints (Department Policy 661.3.4) 	<p>4 Hours</p> <p><i>SCCJA Basic Manual Mod III</i></p>
<p>XI. Communications (Department Policies 181 & 181.1)</p> <ul style="list-style-type: none"> A. Mobile/Walkie Talkie Transmitting B. Communications Center Security 	<p>4 Hours</p> <p><i>SCCJA Basic Manual Mod III</i></p>
<p>XII. DUI Detection Techniques</p> <ul style="list-style-type: none"> - Passive Alcohol Sensors (Department Policy 661.1.10) 	<p>4 Hours</p> <p><i>SCCJA Basic Manual Mod II</i></p>
<p>XIII.Precision Driving</p> <ul style="list-style-type: none"> A. Non-emergency Response (Department Policy 241.2.1) B. Emergency Response (Department Policy 241.2.1) C. Vehicular Pursuit (Department Policy 241.2.2) D. Tire Deflating Devices, STOP Sticks (Department Policy 241.2.2) 	<p>8 Hours</p> <p><i>LP on File</i></p> <p><i>Federal Signal LP</i></p>
<p>XIV.Car Stops (Department Policy 661.6)</p> <ul style="list-style-type: none"> A. Low Risk B. High Risk 	<p>8 Hours</p> <p><i>SCCJA Basic Manual Mod III</i></p>
<p>XV.Defensive Tactics (Department Policy 101.3)</p> <ul style="list-style-type: none"> A. Ground Defense B. Handcuffing Techniques 	<p>8 Hours</p> <p><i>PPCT Manual + SCCJA Mod I + LP on File</i></p>
<p>XVI.Building Entry and Clearing</p> <ul style="list-style-type: none"> A. Low Risk B. High Risk C. Active Shooter 	<p>6 Hours</p> <p><i>SCCJA Mod III + LP on File</i></p>

Patrol "Rookie" Training Outline

<p>XVII.Report Writing</p> <ul style="list-style-type: none"> A. Incident Reports (Department Policy 182.2) (Including <i>SCIBRS</i>) B. Booking (Department Policy 101.2.5) C. Investigative Officer's Report D. Others (Juvenile "Release to Custody", Municipal Court Summons, etc.) 	<p>8 Hours</p> <p><i>LP on File + SCCJA Basic Manual Mod III</i></p>
<p>XVIII.Courtroom Procedures</p>	<p>4 Hours</p> <p><i>LP on File</i></p>
<p>XIX.Detainee Transportation (Department Policy 270)</p>	<p>4 Hours</p> <p><i>SCCJA Mod III</i></p>
<p>XX.Victim/Witness Assistance (Department Policy 355)</p> <ul style="list-style-type: none"> A. Department's role in the victim/witness assistance process B. Available community victim/witness assistance programs and resources (United Way) C. The victim/witness assistance process 	<p>4 Hours</p> <p><i>SCCJA Basic Manual Mod I</i></p>
<p>XXI.Less-Than-Lethal Weapons Qualification</p> <ul style="list-style-type: none"> A. Pepper Aerosol Restraint Spray (Department Policies 101.3, 101.3.1 & 101.3.9) B. Asp Straight Baton (Department Policies 101.3 & 101.3.9) 	<p>8 Hours</p> <p><i>LP on File</i></p>
<p>XXII.Firearms Training</p> <ul style="list-style-type: none"> A. Use of Force (Department Policy 101.3) B. Weapons and Ammunition (Department Policy 101.3.9) C. Service Issue Proficiency and Qualification D. Shotgun Proficiency and Qualification 	<p>16 Hours</p> <p><i>LP on File</i></p>
<p>XXIII.Community Policing Concepts (+ Police Athletic League [PAL])</p>	<p>4 Hours</p> <p><i>LP on File</i></p>
<p>XXIV.Bloodhound Procedures(Department Policy 541.1.4.3)</p>	<p>8 Hours</p> <p><i>LP on File</i></p>
<p>XXV.Bloodborne Pathogens (City Policy)</p>	<p>2 Hours</p> <p><i>Am Red Cross LP+ City Exposure Control Plan</i></p>
<p>XXVI.Hazard Communications Program (City Policy)</p>	<p>2 Hours</p> <p><i>LP on File + OSHA Power Point</i></p>

Patrol "Rookie" Training Outline

XXVII. News Media Training (City Policy)	1 Hour <i>City Policy Review</i>
Criminal Intelligence Training	1 Hour <i>Department Policy</i>
XXVIII. Defensive Driving Course (DDC-8)	8 Hours <i>NSC DDC-8 LP & Training Program</i>
XXIX. SLED PPE	4 Hours <i>3M LP & Training Program</i>
XXX. Business Licensing	2 Hours <i>LP on File with City Hall</i>
XXXI. Helping Hands Tour	1 Hour
XXXII. HelpLine Tour and Resources	1 Hour
XXXIII. City of Aiken Noise Ordinance Training	1 Hour <i>LP on File</i>
XXXIV. OSHA Emergency Action Plan Training (EAP)	1 Hour <i>LP on File</i>
XXXV. SLED/NCIC Training	16 Hour Course
XXXVI. Mobile Data System	4 Hours
XXXVII. National Incident Management System (NIMS)	As prescribed by FEMA
XXXVIII. Law Enforcement Code of Ethics Training (Department Policy 101.1.2)	1 Hour

Charleston City

Pre Academy

March 6, 2017 to April 14, 2017

Basic 667

April 16, 2017 to May 26, 2017

Pre-Academy Training Schedule

Date	Time	Course of Instruction	Instructor	Location
Week 1				
Monday, March 06, 2017	0800 - 1700	Human Resources	HR Staff	
Tuesday, March 07, 2017	0800 - 1100	Pre - Academy Overview / Misc Admin	Training Staff	Squad Room
	1100 - 1300	Equipment / Uniform Issue	S. Clark	
		Vest Fitting	Lawmen's	
1400 - 1600	ID Cards, NCIC Security Profiles	C. Johnson, NCIC Ops		
Wednesday, March 08, 2017	0800 - 0930	Welcome to Law Enforcement: A Reality Check	Lt. Myers	
	0930 - 1200	Ethics	Lt. Byrne	
	1300 - 1500	Chief's Presentation	Chief Mullen	
	1500 - 1600	Organizational Structure	Sgt. McLaughlin	
Thursday, March 09, 2017	0930 - 1130	Police Stressors / Maintaining Balance	Chaplaincy	
	1300 - 1500	Mental Agility Training	C. Freshman	
	1500 - 1600	Field Trauma Care	A. Richardson	
Friday, March 10, 2017	0830 - 1130	Effective Interaction on Patrol	Wolfsen, Carter	
	1300 - 1430	Legal Overview	Steve Ruemlin	
	1430 - 1600	Affidavits, Court Testimony, Report Writing	Sgt. Bailey	
Week 2				
Monday, March 13, 2017	0730 - 1730	Ride along	Patrol Supervisor	TBD
Tuesday, March 14, 2017	1300 - 1500	SCCJA Registration	Melissa Collins	Building 10, 5400 Broad River Rd., Columbia, SC, 29212
Wednesday, March 15, 2017	0800 - 1700	SFST Wet Lab	Chris Kendall	SCCJA
Thursday, March 16, 2017	0800 - 1700			
Friday, March 17, 2017	0730 - 1730	Ride along	Patrol Supervisor	TBD

Pre Academy

March 6, 2017 to April 14, 2017

Basic 667

April 16, 2017 to May 26, 2017

Pre-Academy Training Schedule				
Date	Time	Course of Instruction	Instructor	Location
Week 3				
Monday, March 20, 2017	0800 - 1700	Firearms Orientation	Sgt. Bradley MPO Bautista, SPO Freshman	CPD Weapon's Range
Tuesday, March 21, 2017	0800 - 1700			
Wednesday, March 22, 2017	0800 - 1700	Patrol Rifle Certification	Sgt. Bradley, MPO Bautista, SPO Freshman	CPD Weapon's Range
Thursday, March 23, 2017	1100 - 2200			
Friday, March 24, 2017	0800 - 1700			
Week 4				
Monday, March 27, 2017	0800 - 1700	Firearms Advanced Training	Firearms Instructors	CPD Weapon's Range
Tuesday, March 28, 2017	0800 - 1200	Forensic Services Orientation	M. Phillips, S. Payne	Squad Room
	1300 - 1700	Powder Print Processing	M. Phillips	
Wednesday, March 29, 2017	0830 - 1130	Managing Officer Created Jeopardy	Sgt. Scholz	Squad Room
	1300 - 1700	CPR / AED	CPR Instructors	Training Room
Thursday, March 30, 2017	0830 - 1500	NCIC Inquiry Certification	Donna McDaniel	CPD Squad Room
	1500 - 1630	NCIC Test		IT Training Room, 2 George St.
Friday, March 31, 2017	0800 - 1000	Driver Training - Classroom	Driving Instructors	Squad Room
	1000 - 1700	Driver Training - Practical		Naval Weapon's Station Goose Creek

Pre Academy

March 6, 2017 to April 14, 2017

Basic 667

April 16, 2017 to May 26, 2017

Pre-Academy Training Schedule				
Date	Time	Course of Instruction	Instructor	Location
Week 5				
Monday, April 03, 2017	0830 - 1600	Defensive Tactics	MPO Bautista	Charleston Airport
Tuesday, April 04, 2017				
Wednesday, April 05, 2017				
Thursday, April 06, 2017				
Friday, April 07, 2017	0830 - 1200	OC Spray Certification	OC Instructors	Squad room / Fraser
	1300 - 1600	FEMA Courses	Independent Study	Independent Study
Week 6				
Monday, April 10, 2017	0800 - 1700	Active Shooter	SWAT	63 Columbus St.
Tuesday, April 11, 2017	0830 - 1130	Practical Exercises Intro	Sgt. Scholz, SPO Freshman	Squad Room
	1300 - 1600	Darkness to Light	Gallucio / Marn	
Wednesday, April 12, 2017	0830 - 0930	Swearing In Preparation	Sgt. Scholz	
	1000 - 1200	Department Photos	Jim Mossman	1023 Wappoo Rd., A-14
	1300 - 1700	Policy and Field Guide Review	Independent Study	Independent Study
Thursday, April 13, 2017	0830 - 1700	Practical Exercises	Training Staff	Squad Room
Friday, April 14, 2017	0800 - 1100	Swearing In Ceremony - 0900 hrs.	Chief Mullen	1st Floor Courtroom



OFFICE OF THE SHERIFF

ANDERSON COUNTY, SOUTH CAROLINA

TRAINING DIVISION

5733 AIRPORT RD

PHONE: 864-260-4670

Welcome to the Anderson County Sheriff's Office your position initially is that of a recruit. You will be in recruit training until you complete the field training program. You will be under the immediate supervision of the training division during that time. In this packet you will find your schedule. It is imperative that you follow this schedule exactly. If you cannot follow, or have a conflict with this schedule notify the field training supervisor immediately. (Schedule subject to change at needs of office)

FIELD TRAINING SUPERVISOR

SERGEANT TODD OWENS

OFFICE: 864-964-2717

MOBILE: 864-844-0236

EMAIL: jtowens@andersonsheriff.com

RECRUIT SCHEDULE

Day One

Monday February 27 2017

0830hrs Training Center building at 5733 Airport Rd, and receive introduction packet and general introduction to the Anderson County Sheriff's Office. Discuss schedule and report times. Discuss rank structure and chain of command (GO 101, 102).

1200hrs Lunch Break

1300hrs Training Center: Preregistration for SCCJA (South Carolina Criminal Justice Academy). Discuss Code of Conduct (GO 107). Discuss Electronic Media (GO 144) Emergency Procedures (GO 242) Weapons GO 204 Use of Force GO 205.

1600hrs Dismissal

(GO= General Orders)

RECRUIT SCHEDULE

Day Two

Tuesday February 28 2017

0830hrs Training Center: General Orders: Written Directives 100, Training 120, Remedial Training 121, Field Training 122, Career Development 114, Recognition Program 126, Rendering Respect 128, Funeral Procedures 117.

1200hrs Lunch Break

1300hrs Training Center: General Orders: Patrol Services 221, Criminal Investigations 213, Special Operations 212, School Resource 230, Narcotics 218, Victim Advocates/ Witness Assistance 232.

1600hrs Dismissal

RECRUIT SCHEDULE

Day Three

Wednesday March 1 2017

0830hrs Training Center: NCIC Security Awareness TAC Lula Boseman. Meet with Anderson County Personnel Department; Kathy Fulbright.

1200hrs Lunch Break

1300hrs Training Center: General Orders: Use of Force 205, Weapons 204, Sheriff's Office Vehicles 201, Emergency Vehicle Operations 202. Discuss officer safety issues and view officer safety videos. Discuss traffic stops and traffic operations (General Orders 222, 223, 224, 225, 226, and 227).

1600hrs Dismissal

Day Four

Thursday March 2 2017

0830hrs Training Center: Uncertified Recruits will travel to South Carolina Criminal Justice Academy for registration. Certified Recruits will accompany Sgt. Chandler to Firearms range for qualifications.

1200hrs Lunch Break

1300hrs Training Center: Sgt. Chandler for laptop and vehicle issuance, firearms qualification.

1600hrs Dismissal

RECRUIT SCHEDULE

Day Five

Friday March 3 2017

0830hrs Training Center: Discuss handgun marksmanship fundamentals, and then travel to Firearms Range. Basic Handgun Qualification

1200hrs Lunch Break

1300hrs Training Center: General Order: Law Enforcement Authority 103.

1400hrs Main Office: Oath of Office and Swearing In Ceremony for Certified Recruits.

1500hrs Main Office: Oath of Office and Swearing In Ceremony for Uncertified Recruits.

Conclusion of Ceremony: Dismissal

RECRUIT SCHEDULE

Day Six

Monday March 6 2017

0830hrs Training Center: Basic Handgun Marksmanship/ Weapon Manipulation

1200hrs Lunch Break

1300hrs Firearms Range: Live Fire

1600hrs Dismissal

Day Seven

Tuesday March 7 2017

0830hrs Training Center: Move to Firearms Range Live Fire

1200hrs Lunch Break

1300hrs Firearms Range: Live Fire

1600hrs Dismissal

RECRUIT SCHEDULE

Day Eight

Wednesday March 8 2017

0830hrs Training Center: Building Clearing

1200hrs Lunch Break

1300hrs Training Center: Building Clearing

1600hrs Dismissal

Day Nine

Thursday March 9 2017

0830hrs Training Center: Building Clearing

1200hrs Lunch Break

1300hrs Training Center: Building Clearing

1600hrs Dismissal

RECRUIT SCHEDULE

Day Ten

Friday March 10 2017

0830hrs Training Center: Emergency Vehicle Operations

1200hrs Lunch Break

1300hrs Training Center: Move to Driving Range

1600hrs Dismissal

RECRUIT SCHEDULE

Day Eleven

Monday March 13 2017

0830hrs Training Center: Emergency Medical Responder Course

1200hrs Lunch Break

1300hrs Training Center: Emergency Medical Responder Course

1600hrs Dismissal

Day Twelve

Tuesday March 14 2017

0830hrs Training Center: Emergency Medical Responder Course

1200hrs Lunch Break

1300hrs Training Center: Emergency Medical Responder Course

1600hrs Dismissal

RECRUIT SCHEDULE

Day Thirteen

Wednesday March 15 2017

0830hrs Training Center: TECC (Tactical Emergency Casualty Care)

1200hrs Lunch Break

1300hrs Training Center: TECC (Tactical Emergency Casualty Care)

1600hrs Dismissal

Day Fourteen

Thursday March 16 2017

0830hrs Training Center: Emergency Medical Responder Course

1200hrs Lunch Break

1300hrs Training Center: Emergency Medical Responder Course

1600hrs Dismissal

Day Fifteen

Friday March 17 2017

0830hrs Training Center: Emergency Medical Responder Course

1200hrs Lunch

1300hrs Training Center: Emergency Medical Responder Course

1600hrs Dismissal

RECRUIT SCHEDULE

Day Sixteen

Monday March 20 2017

0830hrs Training Center: Emergency Medical Responder TEST

1200hrs Lunch Break

1300hrs Training Center: Emergency Medical Responder TEST

1600hrs Dismissal

Day Seventeen

Tuesday March 21 2017

0830hrs Training Center: Defensive Tactics

1200hrs Lunch Break

1300hrs Training Center: Defensive Tactics

1600hrs Dismissal

RECRUIT SCHEDULE

Day Eighteen

Wednesday March 22 2017

0830hrs Training Center: Discuss Office Issued Firearms (Shotgun, Backups)

1200hrs Lunch Break

1300hrs Firearms Range: Familiarization course for (Shotguns and Backups)

1600hrs Dismissal

Day Nineteen

Thursday March 23 2017

0830hrs Training Center: Defensive Tactics

1200hrs Lunch Break

1300hrs Training Center: Defensive Tactics

1600hrs Dismissal

Day Twenty

Friday March 24 2017

0830hrs Training Center: Remedial Training

1200hrs Lunch

1300hrs Training Center: Remedial Training

1600hrs Dismissal

Rock Hill PD Pre-Academy for Trainees

First we speak with the trainees to get a good understanding of what experience they have to tailor the instruction. Due to the hire dates on some of the trainees, we don't have enough time to start a true pre-academy school. Below lists out the overview of subjects that we make sure to cover before the academy starts.

- I. Firearms
 - a. Safety
 - b. Stance/Grip
 - c. Sight Alignment/Sight Picture
 - d. Trigger press then follow through.
- II. Driving
 - a. Seat/Mirror/Steering Wheel Position
 - b. Braking/Throttle Control
 - c. Steering Technique
 - d. Vehicle Dynamics
 - e. Backing
 - f. Emergency Equipment Operations
 - g. Academy Course Obstacles
- III. Defensive Tactics
 - a. Stance
 - b. Strikes
 - c. Handcuffing
 - d. Takedowns
 - e. Weapons Retention
- IV. Traffic Stops
 - a. Vehicle Placements
 - b. Light Usage
 - c. Vehicle Approach
 - d. Officer Communications
 - e. Radio Communications
- V. Building Clearing
 - a. Room Entry
 - b. Hallway Movements
 - c. Digging Corners
 - d. 360 degree Security
 - e. Noise/Light Discipline
- VI. Active Shooter
 - a. Priorities of Life
 - b. Security
 - c. Movements
 - d. Tourniquets/Trauma First Aid
 - e. IEDs

- f. Breaching
- VII. Taser
 - a. Continuum of Force
 - b. Nomenclature
 - c. Proper Use
 - d. Proper Deployment
 - e. Documentation
- VIII. Report Writing
 - a. Elements of the report
 - b. Reason to be thorough
 - c. Proper follow up
- IX. Legals
 - a. The trainees are given an overview of the legal system and elements of laws.
- X. Departmental Policy
 - a. The trainees review and learn the department's policy.

North Myrtle Beach DPS

Pre-Service Class List

1. History of Our Agency/City
2. PPCT (brief intro to Use of force, and basic movements)
3. Firearms (SCCJA Standard Basic Course with class) this includes shotgun
4. TR310/Report Beam
5. P One (Incident Report writing)
6. Traffic Stops
7. Ethics
8. PowerDMS (training tracking, document dissemination software)
Along with this they have a Pre-Service Packet they complete consisting of Policy and SOG

9. EVO
10. Tactical Communications (Verbal Judo)
11. Cultural Diversity

This was a 4 week program; however, we no longer have access to the Legal Videos and CDV that they give to the reserve officers.

Additional to these two weeks we conduct a week long Post Academy training class focusing on Dept. Specifics:

1. Community Policing Defined (VCPI Class)
2. New Perspectives on Community Oriented Policing (VCPI Class)
3. Geo-Based Policing
4. PTO (our field training program) (3 hour block)
5. Tour of the city

Legislative Oversight Committee

SCCJA Response to Inquiry

3/22/17

Advanced Training Courses:

1. Are advanced training courses only taught to those within the State or are there entities in other states that send their personnel to advanced training courses at the Academy?

Response: The Academy has had personnel from other states attend advanced training courses at the Academy. Sometimes this occurs when training is offered by Federal agencies or vendors contracted by the Academy other State agencies. We have also had other states contact the Academy to attend some of the instructional courses that we teach. This had occurred with the Academy's Driving Instructor Course, Firearms Instructor Courses. The Academy has also sent our instructors to other states and federal academies to receive training. The Academy is a member of The International Association of Directors of Law Enforcement Standards and Training which is an organization whose mission is to research, develop, and share information, ideas and innovations which assist states in establishing effective and defensible standards for employment and training of law enforcement officers, and, in those states where dual responsibility exists, correctional personnel. IADLEST is an association of standards and training managers and leaders. Its primary focus is criminal justice standards and training. To the extent that the focus and the values promoted thereby can be furthered and shared, all training professionals are welcome as members.

2. What does the Academy do to ensure it is teaching the most current techniques and classes?

Response: The Academy requires all lesson plans to be reviewed every 2 years for currency, accuracy and best practice. However, if something changes prior to the review process any and all lesson plans affected are updated immediately. Examples might be changes in the law or court decisions that impact the training material. Instructors are also encouraged to attend training seminars or classes that will improve their working knowledge of the subjects they teach. Instructors are given ample time to research and study areas within the criminal justice field to maintain currency. The librarian sends out constant periodicals and articles containing current law enforcement trends and issues for the instructional staff to read and study.

CJA Forms

Definitions:

1. WORD Document that can be sent via email: Can be filled out electronically, but probably requires a signature. Can be submitted via email or US Mail.
2. PDF that can be sent via email: Can be filled out electronically, but probably requires a signature. Can be submitted via email or US Mail.
3. Electronic Form: Submitted directly to CJA by typing into an online web form.

Table of Contents

<u>Registration Forms</u>	1
Registration Checklist-- WORD Document that can be sent via email	2
Candidate Training & Certification Application – Electronic Form	3
Medical History Form – PDF that can be sent via email	8
DHEC Tuberculosis Form – PDF that can be sent via email	18
Limited Duty Firearm and EVO Affidavit -- WORD Document that can be sent via email	19
Application for Accommodations – PDF that can be sent via email	20
Request Application for Food Accommodations – PDF that can be sent via email	24
<u>BTOT Forms</u>	28
Documentation for BTOT Registration Checklist -- WORD Document that can be sent via email	29
Basic Telecommunication Operator Application and Document Attestation – Electronic Form	
<u>Certification/Compliance Forms</u>	35
Personnel Change in Status (PCS): -- WORD Document that can be sent via email	
New Employee	36
Routine Separations	37
Separation Due to Misconduct	38
911 TCO PCS	40
Mandatory Retraining Notification (MRN) -- WORD Document that can be sent via email	41
<u>Standards/Testing</u>	43

Departmental Lesson Plan Format -- WORD Document that can be sent via email	44
Departmental LP Cover Sheet and Approval Form -- WORD Document that can be sent via email	49
Institutional Provider Application for Course Approval -- WORD Document that can be sent via email	51
Application for Special Test Accommodations – PDF that can be sent via email	52
<u>Advanced Training</u>	56
Field Training Officer Course Request Form – Electronic Form	57
<u>Traffic Safety</u>	59
SMD Course Request Form – Electronic Form	60
SMD Road Proficiency Test Form – PDF that can be sent via email	62
SMD Instructor Road Proficiency Submittal Form – Electronic Form	73
SMD Instructor Recertification – Electronic Form	76
SFST Course Request Form – Electronic Form	78
SFST Proficiency Form – Electronic Form	82
SFST Instructor Recertification Form – Electronic Form	85
<u>Reserve Training</u>	87
Application for Approval as SC Reserve Department (must be completed annually) -- WORD Document that can be sent via email	88
Application for SC Reserve Officer Training Implementation (must be completed before each	

training program begins) -- WORD Document that can be sent via email	90
Reserve Attestation and Authorization to Release Form -- WORD Document that can be sent via email	94
Departmental Training Verification -- WORD Document that can be sent via email	95
Reserve Firearms, EVO and Local Ordinances/Policies Qualification and Training Verification Form -- WORD Document that can be sent via email	96
Reserve Officer Training Program PPCT Proficiency Form -- WORD Document that can be sent via email	97
<u>Out-of-State Transfers</u>	98
Training Review Request Form -- WORD Document that can be sent via email	99
Release Authorization Form – PDF that can be sent via email	100
<u>K9 Certification</u>	101
K9 Certification Form – Electronic Form	102
<u>Arson Investigators</u>	103
Guidelines for Arson Investigator Certification – PDF that can be sent via email	104
<u>Appendix</u>	106
Accommodations Request for Applicants with Disabilities	107
Accommodations Request for Applicants with Food Allergies	111
PCS Instructions	114

MRN Instructions	117
Accommodations Request Involving Written Examinations	118
Reserve Officer Administrative Guide	124
POST Certification and Compliance Letter	138
Request for Training Reviews	139

Registration Forms

Registration Checklist-- WORD Document that can be sent via email

Candidate Training & Certification Application – Electronic Form

Medical History Form – PDF that can be sent via email

DHEC Tuberculosis Form – PDF that can be sent via email

Limited Duty Firearm and EVO Affidavit -- WORD Document that can be sent via email

Application for Accommodations – PDF that can be sent via email

Request Application for Food Accommodations – PDF that can be sent via email

**SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY
5400 Broad River Road
Columbia South Carolina, 29212-3540**

Candidate's Name:

Candidate's SS#:

**Documentation for Basic Jail, Basic Law, Special Basic
or Limited Duty Registration
Check List**

- Completed Online Law Enforcement Candidate Training & Certification Application and Document Attestation**

Each candidate is required to bring the following documents to Registration:

- Driver's License or Photo ID**
- Pre-placement Consent & Medical History Form with TB test results (DHEC Form 1420)**
- FAQ-EVO Form - (Firearm Qualification & Emergency Vehicle Operation Policy) This form can be imported into the Application or brought separately. This form is ONLY required for Class 3 (Limited Duty) Candidates**

Revised 06/23/2015

SC Criminal Justice Academy

Law Enforcement Candidate Training & Certification Application

Employing Agency: *



Agency or Training Officer Email *

ex: myname@example.com

Type of Training Requested: *



Applicants Position

Patrol, Detention, Court Security, etc.



Date of Hire *



Month

Day

Year

A PCS has been submitted on this employee: *

YES

NO

Title/Rank *



Applicant Full Name *

First Name

Middle Initial

Last Name

Suffix

Applicant Home Address

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Applicants E-mail ex: myname@example.com

US Citizen *

Yes

No

Race *



Sex *



Birth Date *

▼ ▼ ▼
Month Day Year

Eye Color



Hair Color



Height (inches)



Weight (lbs)

Place of Birth *

State or Country if out of l

Education *



Degree



Name of College

S.C. OLN

Has the candidate been licensed in another state in the past 5 years? *

Yes

No

Veteran? *

Yes

No

1. Candidate is covered by Workman's Compensation for on-the-job injury. *

- Yes
- No

2. Officer was hired by and is regularly on the payroll of this agency. *

- Yes
- No

3. Officer is granted statutory authority to enforce all or some of the criminal, traffic, and penal laws of the State and does possess, with respect to those laws, the power to effect arrests. *

- Yes
- No

Commissioning Agency: Complete A or B below:

FOR B: Most State Agencies & College PD require SLED commissions. Agencies should submit a copy of SLED commission when candidate is registered. If Agency has not yet received the commission, Candidate will not be certified until a copy of commission is received by the Certification Unit at SCCJA.

A. Officer is commissioned by this Agency: *

- Yes
- No

Or Officer will be commissioned by this Agency upon graduation : *

- Yes
- No

B. Officer is commissioned by SLED (constable commission) IF YES, UPLOAD FILE BELOW *

- Yes
- No

Or will be commissioned by SLED (commission has been applied for - send to Certification Unit upon receipt) *

- Yes
- No

LAW ENFORCEMENT EMPLOYMENT HISTORY (last 3 years)

(Patrol, Reserve, Jail, Limited Duty, Telecommunications, etc.)

Has your candidate ever attended the SC Criminal Justice Academy for training? *

- Yes
 No

Has Your Candidate had out of state, Federal or Military Law Enforcement Training? *

- Yes
 No

The South Carolina Criminal Justice Academy (Academy) provides reasonable accommodations in accordance with the Americans with Disabilities Act (ADA) for individuals with documented disabilities who demonstrate a need for accommodation, when such accommodations can be provided without compromising the Academy's training or certification standards. Will you need testing accommodations because of a disability while at the Academy? *

- Yes
 No

Verification of Background Investigation

(Driver's Record; Credit Check; Criminal Record Check) Applicants must list any and all criminal charges regardless of the date of offense and the disposition (dismissal, not guilty, not proessed). Do not include minor traffic offenses, but specifically include DUI, DWI, Driving While License Revoked/Suspended, Speeding to Elude Arrest, or Duty to Stop in Event of Accident. If you list a charge(s), please ensure that the In-State and Interstate Criminal History Check shows Final Disposition for each charge(s).

Applicant can list criminal charges in this box.

Upon Completion of Background Investigation please check appropriate box below: *

- Criminal Record
 No Criminal Charges
 No Criminal Convictions or Pending charges other than minor traffic offenses

Investigators Comments:

Date Investigation Began *

Date Investigation Ended *

mmdyyyy

mmdyyyy

Investigators Title *

Investigators Name *

Chief, Lt., Sgt. etc.

Inv. First Name

Inv. Last Name

Investigators Phone Number *

Investigators Address (if different from employing agency)

By checking the box below, as the applicant for training and certification, I attest that I am aware of the minimum standards for employment as a law enforcement officer, that I meet or exceed each of those requirements, that the information provided above and all other information submitted by me, both oral and written throughout the employment and certification process, is thorough, complete, and accurate to the best of my knowledge. I further understand and agree that any omission, falsification or misrepresentation of any fact or portion of such information can be the sole basis for termination of my employment and/or denial, suspension or revocation of my certification at any time. I specifically acknowledge that my continued employment and certification are contingent on the results of the fingerprint records check and other criminal records being consistent with the information provided to my employer and to the South Carolina Criminal Justice Academy.

Applicant Attestation **I Agree**

*

By checking the box below, I, as an official representative of the appointing agency, do submit to the Criminal Justice Academy, the above named appointee as a candidate for training/certification. The candidate meets or exceeds each of the minimum standards for employment and this Agency has properly conducted the required employment procedures as established by the South Carolina Criminal Justice Academy as required by the Code of laws of South Carolina, 1976, Chapter 23 Training for Law Enforcement Officers and Regulations Chapter 38. I acknowledge that any omission, falsification or misrepresentation of information or procedures, by either the candidate or this Agency, through the employment and/or certification process may result in certification being denied, suspended or revoked by the South Carolina Criminal Justice Academy.

Agency
Head/Authorized
Representative *

I Agree

South Carolina Criminal Justice Academy

DOCUMENT ATTESTATION FOR ACADEMY REGISTRATION

Documents on File at this Department:

1. Copy of Birth Record or Naturalization Papers which ensure that the Candidate is 21 years of age and a United States Citizen
2. Copy of High School Diploma, G.E.D., Equivalency Certificate (Military or other), Official Transcript accepted by the South Carolina Department of Education or South Carolina special certificate.
3. Certified South Carolina Driving Record - Must cover the 5 previous years with "NO SUSPENSIONS" as a result of DUI,

DWI, Reckless Homicide, Involuntary Manslaughter or Leaving the Scene of an Accident

Note: State or Local Correctional Officers may hold a valid Driver's License from any other Jurisdiction in the United States

4. Certified Out of State Driving Record. Required only if Candidate has not been in South Carolina for the previous 5 years. Out of State record must reflect "NO SUSPENSIONS" as a result of DUI, DWI, Reckless Homicide, Involuntary Manslaughter or Leaving the Scene of an Accident.

By checking the box below, I hereby attest that the documentation as required by S.C. Code Ann. 23-23-60 (B)(1) through (B)(9) has been reviewed and will be maintained by this department in the above referenced officer's file. I understand that should any conflict regarding documentation authenticity arise, the South Carolina Criminal Justice Academy reserves the right to review all documents maintained by the department on this officer.

Agency Head/Authorized Representative * I agree

Printed Agency Head or Authorized Representative Name that has submitted this document *

Agency Head First Name Agency Head Last Name

Agency Head or AR Title *

Chief, Director, etc.

Date * 03 - 22 - 2017
Month Day Year

Submit Clear Form Print Form

**SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY
5400 Broad River Road
Columbia, South Carolina 29212-3540
(803) 896-7802**

MEDICAL HISTORY, EXAMINATION, AND FITNESS FOR TRAINING

TO THE EMPLOYER:

This form is inappropriate for use as a pre-offer inquiry under existing State and Federal law. **THIS FORM SHOULD NOT BE USED UNTIL A CONDITIONAL OFFER OF EMPLOYMENT IS MADE.** Once a conditional offer of employment is made, you may use this form and the accompanying medical examination to determine if the applicant can perform the essential functions necessary to successfully complete training at the Criminal Justice Academy. All inquiries should focus on the applicant's ability to perform the position being sought, not focus on any perceived physical or mental disability which would exclude the applicant.

**REPORT OF EXAMINATION
To be on file at the Academy**

TO THE CANDIDATE:

All information **MUST** be completed. Please type or print legibly and provide to your examining physician. Attach additional sheets/documentation as necessary. By my signature, I certify that there are no willful misrepresentations, omissions or falsifications in my answers below and the answers given are true to the best of my knowledge and belief. Any falsification, withholding or failure to answer all questions completely and accurately may disqualify me from receiving training and/or certification as a law enforcement officer. I understand this information will be used to determine whether I am medically capable of performing the essential functions and physical demands of the training at the South Carolina Criminal Justice Academy. **Medical information regarding my ability to perform these functions and demands will be made available to the South Carolina Criminal Justice Academy and I do, hereby, waive any privacy rights I may have under HIPAA (110 Stat. 1936) with regard to this examination and any medical treatment I may need during my period of training at the South Carolina Criminal Justice Academy.**

Candidate's Signature _____ Date: _____

CANDIDATE'S NAME: _____

CANDIDATE'S SOCIAL SECURITY NUMBER: _____

CANDIDATE'S EMPLOYING LAW ENFORCEMENT AGENCY:

CANDIDATE'S DATE OF BIRTH: ___/___/___ CANDIDATE'S AGE: ___

CANDIDATE'S HOME ADDRESS: _____

CANDIDATE'S HOME TELEPHONE NUMBER: (____) _____ - _____

EMERGENCY CONTACT PERSON: _____

TELEPHONE NUMBER FOR EMERGENCY CONTACT: (____) _____ - _____

1. Do you have or have you ever had:

	YES	NO		YES	NO
Measles	___	___	Bronchitis	___	___
Mumps	___	___	Chickenpox	___	___
Polio	___	___	Seizures	___	___
Pneumonia	___	___	Tuberculosis (TB)	___	___
Cancer	___	___	Diabetes	___	___ ^{tt}
Blood Problems	___	___	High Blood Pressure	___	___*
Heart Problems	___	___ ^t	Kidney Problems	___	___
Ulcers	___	___	Arthritis	___	___
Hernia	___	___	Skin Problems	___	___
Back Problems	___	___	Asthma	___	___
Hemorrhoids	___	___	Mental Illness	___	___
Hepatitis	___	___	Lung Problems	___	___
Surgery	___	___ ^{**}	Significant Injury	___	___ ^{tt}
High Cholesterol or	___	___	Lupus	___	___
High Triglycerides	___	___ ^{***}			

*High Blood Pressure – If Yes, Explain: _____
Systolic _____ Diastolic _____

^tHeart Problems – If Yes, Explain: _____

**Surgery – If Yes, Explain: _____

^{tt}Significant Injury – If Yes, Explain: _____

***High Cholesterol or High Triglycerides – If Yes, Explain: _____

Diabetic – If Yes, Type 1 OR Type 2
Explain: _____

2. Are you allergic to any medicines, food or other substances? YES NO
If Yes, please list all items you are allergic to: _____

3. Do you use:	Yes	No	How Much?	In Past?
Cigarettes	_____	_____	_____	_____
Cigars	_____	_____	_____	_____
Alcohol	_____	_____	_____	_____
Drugs	_____	_____	_____	_____

4. List all medications you take regularly:

5. Have you ever been exposed to fumes, dust, chemicals, loud noise or radiation at work or elsewhere? YES NO
If Yes, Explain: _____

6. Have you ever been unable to hold a job because of medical reasons? YES NO
If Yes, Explain: _____

7. Have you lost time from work for medical reasons in the past five years? YES NO
If Yes, Explain: _____

8. Have you ever suffered a back or pelvis injury? YES NO
If Yes, Explain: _____

9. Have you ever been injured in an automobile accident? YES NO
If Yes, Explain: _____

10. Have you ever been injured in an industrial accident? YES NO
If Yes, Explain: _____

11. Do you have any medical disability? YES NO
If Yes, Explain: _____

12. Have you ever experienced an injury to any bones or joints? YES NO

If Yes, Explain: _____

13. Have you ever experienced any shortness of breath? YES NO

If Yes, Explain: _____

14. Do you have any respiratory disorders (Asthma, etc...)? YES NO

If Yes, Explain: _____

15. Have you had any surgery during the past 12 months? YES NO

If Yes, List: _____

16. Are you pregnant? YES NO If No, skip to question 17

If Yes:

OB/GYN PHYSICIAN'S NAME: _____

OB/GYN PHYSICIAN'S PHONE: _____

17. Are you presently involved in an exercise program? YES NO

If Yes, Explain: _____

If No, when was the last time you were involved in an exercise program and what did that exercise program entail? _____

18. How do you rate your overall health? Poor ____ Fair ____ Good ____ Excellent ____

Explain: _____

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TO THE PHYSICIAN:

All information MUST be completed. Please type or print legibly and return to the Law Enforcement Candidate and/or the Employing Law Enforcement Agency. Attach additional sheets/documentation as necessary.

It is the primary consideration of the South Carolina Criminal Justice Academy to safeguard the health and well-being of all candidates participating in our training. Therefore, all candidates for training at the South Carolina Criminal Justice Academy should be free of any medical, mental, psychological, or other conditions which may interfere with his/her ability to safely participate in and successfully perform law enforcement activities. Below is a listing of program curriculum and proficiency performance areas for Physician review and consideration in conjunction with the Physician's knowledge regarding the candidate's past and current medical condition. The program curriculum and proficiency performance areas include, but are not limited to:

- Complete formation runs of various distances up to 5.0 miles in length in a timely manner, without stopping (Class 1 Law Enforcement Officer)
- Participate in 90 minute long physical training sessions designed to increase strength and endurance (Class 1 Law Enforcement Officer)
- Tolerate exposure to extreme heat/cold/humidity/inclement weather
- Climb, crawl, wrestle, jump, lift and drag heavy weights
- Visually distinguish targets on a firing range at distances of up to 75 yards
- Safely operate a motor vehicle at various speeds, including very high speeds, and under varying conditions, including with police lights and sirens activated (Class 1 Law Enforcement Officer)
- Tolerate loud noises (sudden and sustained) to include sirens, weapons firing, and other percussions
- Safely handle various types of weapons, including, but not limited to firearms, tazers, OC Spray (Pepper Spray), Impact Weapons (Asp, Baton, etc...). This includes being able to independently hold and fire a firearm with either hand (fire one handed).
- Tolerate the psychological stresses of law enforcement work, including working swing shifts, observing and assisting with traumatic incidents (deciding to discharge weapon in protection of self or others; responding to serious crimes in progress; responding to child abuse cases; death and dismemberment scenes; and other acts of extreme malice, etc...), work long hours without the possibility of relief (emergency situations, etc...), and high stress incidents (active shooter incidents, etc...)
- Participate in physically rigorous defensive tactics training including, but not limited to:
 - 1) joint manipulation
 - 2) handcuffing (hands extended behind back)
 - 3) take down techniques (prone position flat on stomach)
 - 4) kicks and strikes utilizing padded bags for protection
 - 5) bending at the waist
 - 6) Kneel on knees (together and individually) unsupported

- Complete a physical agility assessment course, including, but not limited to: running up and down stairs, jumping through an open window, and dragging a 170 lbs dead weight bag (Class 1 Law Enforcement Officer)
- Physical activity and engagements in scenario based training sessions
- Tolerate exposure to various gas/chemical elements (Pepper Spray, OC Spray, Tear Gas, etc...)
- Sit in a desk chair for up to ten (10) hours at a time
- Sustain this level of functioning for 12-14 hours per day for at least 5 days per week

PATIENT/CANDIDATE'S NAME: _____

PATIENT/CANDIDATE'S SOCIAL SECURITY NUMBER: _____

	Normal	Abnormal	Explanation
Eyes	_____	_____	_____
Ears	_____	_____	_____
Hearing	_____	_____	_____
Nose	_____	_____	_____
Throat	_____	_____	_____
Mouth	_____	_____	_____
Neck	_____	_____	_____
Chest/Lungs	_____	_____	_____
Heart	_____	_____	_____
Abdomen	_____	_____	_____
Hernia	_____	_____	_____
Genitourinary	_____	_____	_____
Back	_____	_____	_____
Extremities	_____	_____	_____
Upper	_____	_____	_____
Lower	_____	_____	_____
Neurologic	_____	_____	_____
Psychological	_____	_____	_____
Skin	_____	_____	_____
U.A. Chemistry	_____	_____	_____

TB Skin Test: Attach DHEC Form 1420

Height _____

Weight _____

Blood Pressure _____

Pulse _____

Visual Acuity R _____ L _____ Without correction

R _____ L _____ With correction

Color Vision _____

The medical history and physical examination results for this Candidate are on file in the Physician's office at the below address and will be made available to the Criminal Justice Academy in full upon request. The Candidate has been informed of the examination results and the presence of any conditions which may need follow-up evaluation and/or treatment. If questions of suitability should arise during the course of training, a candidate may be required to obtain follow-up medical evaluation at the expense of the candidate or his/her employer.

ATTESTATION: I have reviewed the activities that this candidate for law enforcement training will be required to participate in during his/her training at the South Carolina Criminal Justice Academy. I have conducted a complete physical examination of this candidate and attest that he/she (____ is) (____ is not) medically suitable to participate in the training program at the Academy.

COMMENTS: _____

PHYSICIAN'S NAME: _____

PHYSICIAN'S ADDRESS: _____

PHYSICIAN'S PHONE: _____

Date: _____

Physician's Signature

NOTE: All information must be completed above, the Physician must check medically suitable/unsuitable and sign and date this page.

[REMAINDER OF THIS PAGE INTENTIONALLY LEFT BLANK]

TO THE CANDIDATE:

This section is to remain blank until you report to the South Carolina Criminal Justice Academy for training.

ATTESTATION: I have reviewed this Medical History, Examination, and Fitness for Training form and hereby attest that answers I provided are **STILL** true to the best of my knowledge. I further attest that I have fully disclosed my medical history and current physical condition through this form. **Additionally, I agree to inform the staff of the South Carolina Criminal Justice Academy as soon as is reasonably possible if I become aware any of the information I have provided through this form has changed or is untrue.**

Date: _____

Candidate's Signature

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School Employee/Individual Certificate of Evaluation for Tuberculosis

Name: Last _____ First _____ M.I. _____ Residence Address _____ City _____ County _____

Public or private school, kindergarten, nursery or day care center of current employment or other employer or individual _____ Date employed _____

TEST RESULTS	TUBERCULIN SKIN TEST _____ <small>Date Given</small> 5 TU PPD MANTOUX METHOD _____ mm <small>Date Interpreted</small>	CHEST X-RAY Date _____ Interpretation _____	REMARKS
	DISPOSITION <input type="checkbox"/> No tuberculosis infection per 5 TU PPD ¹ <input type="checkbox"/> Tuberculosis infection, no evidence of disease <input type="checkbox"/> Preventive treatment started _____ and completed _____ ¹ <input type="checkbox"/> Preventive treatment started _____ but not completed ² <input type="checkbox"/> Preventive treatment not prescribed/refused ² <input type="checkbox"/> History of tuberculosis disease Treatment started _____ and completed _____ <input type="checkbox"/> Current tuberculosis disease <input type="checkbox"/> Non-contagious as of _____ and medically cleared to start/resume school/other employment on _____ ¹ No further routine screening required. ² Remains at lifelong risk of developing tuberculosis.		
CERTIFICATION	<input type="checkbox"/> This is to certify that I have examined the school employee named herein for tuberculosis and report my findings as indicated above pursuant to the Code of Laws of South Carolina, 1976, as amended April 24, 1979. <input type="checkbox"/> This is to certify that I have examined the individual named herein for tuberculosis and report my findings as indicated above.		
	Physician's Signature _____ Date _____		

DHEC 1420 (08/1998) **DISPOSITION:** This form shall be retained in the files of the current employer or individual following evaluation and certification.



School Employee/Individual Certificate of Evaluation for Tuberculosis

Name: Last _____ First _____ M.I. _____ Residence Address _____ City _____ County _____

Public or private school, kindergarten, nursery or day care center of current employment or other employer or individual _____ Date employed _____

TEST RESULTS	TUBERCULIN SKIN TEST _____ <small>Date Given</small> 5 TU PPD MANTOUX METHOD _____ mm <small>Date Interpreted</small>	CHEST X-RAY Date _____ Interpretation _____	REMARKS
	DISPOSITION <input type="checkbox"/> No tuberculosis infection per 5 TU PPD ¹ <input type="checkbox"/> Tuberculosis infection, no evidence of disease <input type="checkbox"/> Preventive treatment started _____ and completed _____ ¹ <input type="checkbox"/> Preventive treatment started _____ but not completed ² <input type="checkbox"/> Preventive treatment not prescribed/refused ² <input type="checkbox"/> History of tuberculosis disease Treatment started _____ and completed _____ <input type="checkbox"/> Current tuberculosis disease <input type="checkbox"/> Non-contagious as of _____ and medically cleared to start/resume school/other employment on _____ ¹ No further routine screening required. ² Remains at lifelong risk of developing tuberculosis.		
CERTIFICATION	<input type="checkbox"/> This is to certify that I have examined the school employee named herein for tuberculosis and report my findings as indicated above pursuant to the Code of Laws of South Carolina, 1976, as amended April 24, 1979. <input type="checkbox"/> This is to certify that I have examined the individual named herein for tuberculosis and report my findings as indicated above.		
	Physician's Signature _____ Date _____		

DHEC 1420 (08/1998) **DISPOSITION:** This form shall be retained in the files of the current employer or individual following evaluation and certification.



South Carolina Criminal Justice Academy

To be completed for Limited Duty Officers

VERIFICATION & CERTIFICATION OF THE FIREARMS QUALIFICATION

PLEASE PRINT:

Officer's Name: _____ SSN: _____

Department: _____

Firearms Instructor's Name: _____

On the ____ day of _____, _____, the above-named Officer was taken to the firearms range for qualification purposes. I, the Firearms Instructor, certify the following tasks were completed and the results to be accurate and I recommend the above-named Officer be QUALIFIED.

- (A) Officer was given basic weapon safety, both on duty and off duty.
- (B) Weapons liability, both on duty and off duty, was explained to the Officer.
- (C) The Officer fired the qualification course required by the S. C. Criminal Justice Academy with the following results:

REVOLVER COURSE:	50 Round 25 Yard TRC	_____ Points (250 Max.) (188 Min.)
AUTO PISTOL COURSE:	50 Round 25 Yard AutoCourse	_____ Points (250 Max.) (188 Min.)

Signature of CJA Accredited Firearms Instructor: _____

Print CJA Accredited Firearms Instructor's Name: _____ SS# _____

My Current Accredited Firearms Instructor's Certification Date Is: _____

EMERGENCY VEHICLE OPERATION AFFIDAVIT

I do hereby certify that the above-named Officer has been instructed, fully understands and has been given a copy of this department's Emergency Response Driving Policy.

Department's Authorized Signature: _____ Date: _____

Please complete and mail to:

SC Criminal Justice Academy
 Basic Training Registration
 5400 Broad River Road
 Columbia, SC 29212
 Fax – 803 896-8360



South Carolina Criminal Justice Academy
Registration Section
5400 Broad River Road
Columbia, SC 29212
803-896-8360 (fax)

Application for Accommodations

PART I

Please print legibly (black or blue ink only) or type. To be completed by candidate.

This completed form and required documentation must be mailed to the address as listed above. Requests must be supported by documentation certifying the disability from a qualified professional appropriate for evaluating the disability. Review of a request for accommodations will be deferred until the necessary documentation is submitted. Attach additional pages as necessary.

Accommodations are requested for the following class: _____

Date Class Begins: _____

Name: _____

Last

First

Middle

Mailing Address: _____

Address

City

Zip

Home Phone Number: _____

Work Phone Number: _____

Social Security Number: _____

Nature of Disability

- Chronic Health Problem
- Hearing Disability
- Learning Disability
- Other Disability

- Temporary Accidental Injury
- Visual Disability
- Physical Disability

To document your need for accommodation as completely as possible, please attach, in addition to professional documentation, a personal statement describing in detail your disability and the accommodations requested.

How long ago was your disability first professionally diagnosed? The most recent documentation concerning your disability must be included with this request.

- less than 1 year
- 1-2 years
- 2-4 years
- 5 or more years

What accommodation(s) are you requesting? Please explain how each accommodation request will assist you in alleviating your disability.

Do you require wheelchair access at the facility? Yes No

If your request is for classroom accommodation(s), have you ever received a classroom accommodation(s) in the past?

Secondary or elementary school Yes No Year(s): _____

If yes, accommodation(s) received:

College Yes No Year(s): _____
If yes, accommodation(s) received:

Post Graduate Yes No Year(s): _____
If yes, accommodation(s) received:

Prior attendance at South Carolina Criminal Justice Academy: Yes No Year(s): _____

If yes, accommodation(s) received:

Certification and Authorization

Under penalties of perjury, I hereby certify that the above information is true and accurate. I understand that false information contained in this application may be cause for loss of a certification or denial of possible certification.

Signature: _____ Date: _____

I understand the South Carolina Criminal Justice Academy will use the information obtained by this authorization to determine eligibility for a reasonable accommodation with regard to training procedures and/or housing during my training. If clarification and/or further information regarding my disability or requested accommodation the documentation provided is needed, I authorize the South Carolina Criminal Justice Academy to contact the professional(s) who diagnosed the disability and/or the professional(s) who provided the documentation attached to this request and I authorize those entities to communicate with the South Carolina Criminal Justice Academy for the purpose of providing such clarification and/or further information.

Signature: _____ Date: _____

PART II

Please print legibly (black or blue ink) or type. To be completed by the Practitioner.

Requests shall be supported by documentation certifying the disability from a qualified professional appropriate for evaluating the disability.

Practitioner's Name:

_____ Last First Middle

Office Address:

_____ Address City Zip

Office Phone Number:

_____ Office Fax Number: _____

Type of Practice

Patient's Full Name:

_____ Last First Middle

Date Patient First Consulted:

_____ mm/dd/yyyy

Date Patient Last Seen:

_____ mm/dd/yyyy

Diagnosis of Disability:

Name of Test(s) Used:

Length of Time with Condition:

Recommended Accommodation(s):

Please note:

I hereby certify that the above information is true and is given pursuant to the authorization to release information by my patient. Under penalties of perjury, I declare that the foregoing statements and those in any accompanying documents or statements are mine and that they are true. I hereby certify that I personally examined and evaluated the patient whose name appears on this form and, as a result of that evaluation, that I have completed this portion of this application and that I may be asked to verify the above information at any time.

Signature: _____

Date: _____

Practitioner's License Number: _____

Submit this form to the following address:

**South Carolina Criminal Justice Academy
Registration Section
5400 Broad River Road
Columbia, SC 29212
(803) 896-8360 (fax)**

Disposition for Accommodations Request – To Be Completed By Academy personnel

Reviewer(s):

Signature/Title:

Date:

1. _____
2. _____
3. _____
4. _____
5. _____

Accommodations will be granted? Yes No

Explanation of Accommodations Granted:

Signature/Title: _____

Date: _____

Comments:



**South Carolina Criminal Justice Academy
Registration Section
5400 Broad River Road
Columbia, SC 29212
803-896-8360 (fax)**

Application for Food Accommodations

PART I

Please print legibly (black or blue ink only) or type. To be completed by Candidate.

This completed form and required documentation must be mailed to the address as listed above. Requests must be supported by documentation certifying the food allergy from a qualified professional appropriate for evaluating the food allergy. Review of a request for food accommodations will be deferred until the necessary documentation is submitted. Attach additional pages as necessary.

Accommodations are requested for the following class: _____

Date Class Begins: _____

Name: _____

Last

First

Middle

Mailing Address: _____

Address

City

Zip

Home Phone Number: _____

Work Phone Number: _____

Social Security Number: _____

Nature of Food Allergy: _____

To document your need for food accommodation as completely as possible, please attach, in addition to professional documentation, a personal statement describing in detail your food allergy and the food accommodations requested.

How long ago was your food allergy first professionally diagnosed?

less than 1 year

1-2 years

2-4 years

5 or more years

What food accommodation(s) are you requesting?

Certification and Authorization

Under penalties of perjury, I hereby certify that the above information is true and accurate. I understand that false information contained in this application may be cause for loss of a certification or denial of possible certification.

Signature: _____

Date: _____

I understand the South Carolina Criminal Justice Academy will use the information obtained by this authorization to determine eligibility for a reasonable food accommodation during my training. If clarification and/or further information regarding my food allergy is needed, I authorize the South Carolina Criminal Justice Academy to contact the professional(s) who diagnosed the food allergy and/or the professional(s) who provided the documentation attached to this request and I authorize those entities to communicate with the South Carolina Criminal Justice Academy for the purpose of providing such clarification and/or further information.

Signature: _____

Date: _____

PART II

Please print legibly (black or blue ink) or type. To be completed by Practitioner.

Requests shall be supported by documentation certifying the food allergy from a qualified professional appropriate for evaluating the food allergy.

Practitioner's Name: _____
Last First Middle

Office Address: _____
Address City Zip

Office Phone Number: _____ Office Fax Number: _____

Type of Practice _____

Patient's Full Name: _____
Last First Middle

Date Patient First Consulted: _____ Date Patient Last Seen: _____
mm/dd/yyyy mm/dd/yyyy

Diagnosis of Food Allergy: _____

Name of Test(s) Used: _____

Length of Time with Allergy: _____

Recommended Food Accommodation(s): _____

Does the patient/candidate need any emergency medical treatment or medicine with them during training in case of accidental exposure?
YES NO

If yes, please list emergency medical treatment and/or medicine:

Please note:
I hereby certify that the above information is true and is given pursuant to the authorization to release information by my patient. Under penalties of perjury, I declare that the foregoing statements and those in any accompanying documents or statements are mine and that they are true. I hereby certify that I personally examined and evaluated the patient whose name appears on this form and, as a result of that evaluation, that I have completed this portion of this application and that I may be asked to verify the above information at any time.

Signature: _____ Date: _____

Practitioner's License Number: _____

Submit this form to the following address:
**South Carolina Criminal Justice Academy
Registration Section
5400 Broad River Road
Columbia, SC 29212
(803) 896-8360 (fax)**

Disposition for Food Accommodations Request – To Be Completed By Academy personnel

Reviewer(s):

Signature/Title:

Date:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Food Accommodations will be granted? Yes No

Explanation of Food Accommodations Granted:

Signature/Title: _____

Date: _____

Comments:

BTOT Forms

Documentation for BTOT Registration Checklist -- WORD Document that can be sent via email
Basic Telecommunication Operator Application and Document Attestation – Electronic Form

**SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY
5400 Broad River Road
Columbia South Carolina, 29212-3540**

Candidate's Name: _____

Candidate's SS#: _____

**BASIC TELECOMMUNICATIONS OPERATOR
Documentation for Registration
Check List**

You Are Required To Bring The Following Documents To Registration

Basic Telecommunications Operator Training Application

Document Attestation Form for Registration

This Document must be signed by the Agency Head or Authorized Representative attesting that the following documents are maintained by the department in the above referenced Operator's file.

- **Copy of Birth record which ensures that the candidate is at least 18 years of age**
- **Copy of High School Diploma, G.E.D. Equivalency or Official Transcript accepted by the South Carolina Department of Education (No Certificates)**

Copy of FEMA ICS-100 Training Certificate (prerequisite)

Revised 08/17/12

South Carolina Criminal Justice Academy

5400 Broad River Road Columbia, SC 29212-3540

Basic Telecommunication Operator Training Application and Document Attestation

Type of Training Requested:

Class 4 Telecommunications Officer

Agency Name: *

Training Officer Email: *

ex: myname@example.com

Training Officer Phone Number: *

Area Code - Phone Number

Candidates Full Name *

First Name Middle Initial Last Name Suffix

Candidates E-mail

ex: myname@example.com

Candidates Address

Street Address City State / Province Postal / Zip Code

Phone contact type

Candidates Contact Phone Number

Area Code - Phone Number

Date of Birth *

Month Day Year

Place of Birth:

Race: *

Sex: *

Hair

Eye Color

Height (Inches)

Weight

Date of Hire as 911 Dispatcher: *

Month Day Year

Education Level:

Copy of FEMA ICS 100 (please upload here)

No file chosen

Does your candidate have previous SC Dispatcher experience in the past 3 years? *

- Yes
- No

Does your candidate have previous Out of State Dispatcher experience in the past 3 years? *

- Yes
- No

Candidate is covered by Workman's Compensation for on-the-job injury. *

- Yes
- No

Candidate is scheduled to work the standard hours as prescribed for 911 Operators of the agency. *

- Yes
- No

Candidate was hired by and is regularly on the payroll of this agency. *

- Yes
- No

The South Carolina Criminal Justice Academy (Academy) provides reasonable accommodations in accordance with the Amended Americans with Disabilities Act (ADA) for individuals with documented disabilities who demonstrate a need for accommodation, when such accommodation can be provided without compromising the Academy's training or certification standards.

Does your candidate require Special Testing Accommodations?

- Yes
- No

Criminal Record Check

List any conviction, plea of guilty, plea of no contest or admission of guilt (regardless of withheld adjudication) to a felony, a crime punishable by a sentence of more than one year (regardless of the sentence actually imposed, if any). If you list charge(s), please ensure that the In-State and Interstate Criminal History check shows final disposition information for each charge. If not please submit with this document.

Criminal Record: *

- Yes
- No

Investigator Comments:

Date Investigation Began: *

▼

▼

▼

Month Day Year

Date Investigation Ended: *

▼

▼

▼

Month Day Year

Investigator Name: *

Investigator Title: *

First Name	Last Name	

By checking the box below, as the named applicant for training and certification, I attest that I am aware of the minimum standards for employment as a 911 Telecommunicator, that I meet or exceed each of those requirements, that the information provided above and all other information submitted by me, both oral, written and electronically throughout the employment and certification process, is thorough, complete, and accurate to the best of my knowledge. I further understand and agree that any omission, falsification or misrepresentation of any fact or portion of such information can be the sole basis for termination of my employment and/or denial, suspension or revocation of my certification at any time. I specifically acknowledge that my continued employment and certification are contingent on any other criminal records being consistent with the information provided to my employer and to the South Carolina Criminal Justice Academy.

*

I Agree

By checking the box below, I, as an official representative of the applying agency, do submit to the South Carolina Criminal Justice Academy the above named appointee as a candidate for training and certification. The candidate meets or exceeds each of the minimum standards for employment and this Agency has properly conducted the required employment procedures as established by the South Carolina Criminal Justice Academy as required by the Code of Laws of South Carolina, 1976, Chapter 23 Training for Law Enforcement Officers and Regulations Chapter 38. I acknowledge that any omission, falsification or misrepresentation of information or procedures, by either the candidate or this Agency, through the employment and/or certification process may result in certification being denied, suspended or revoked by the South Carolina Criminal Justice Academy.

*

I Agree

Document Attestation

By checking the box below, I, as an authorized representative of the applying agency, attest that the documentation, as required by Regulations Chapter 38-061 (A) (1-4), has been reviewed and will be maintained by this department in the above referenced officers file.

I understand that should any conflict regarding document authenticity arise, the South Carolina Criminal Justice Academy reserves the right to review all documents maintained by the department on this officer.

Documents on file at the Agency: *

- Copy of Birth Record which ensures candidate is at least 18 years of age
- Copy of High School Diploma, G.E.D., Equivalency or Official Transcript accepted by the South Carolina Department of Education (No Certificates)

*

I Agree

Agency Head or Authorized Representative Printed Name that has submitted this application:

Agency Head or Authorized Representative Title:

Date of Submission:

03	22	2017	
Month	Day	Year	

Certification/Compliance Forms

Personnel Change in Status (PCS): -- WORD Document that can be sent via email

New Employee

Routine Separations

Separation Due to Misconduct

911 TCO PCS

Mandatory Retraining Notification (MRN) -- WORD Document that can be sent via email



SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY

5400 Broad River Road
Columbia, South Carolina 29212-3540
Attention: Certification Department
Phone: (803) 896-7802 Fax: (803) 896-7803



PERSONNEL CHANGE IN STATUS - HIRE FORM

Reporting Department _____ Telephone # _____ Today's Date _____

Officer's Name (First MI. Last) _____ SS# or Academy I.D.# _____
 Male
 Female

Date of Hire _____ Date of Birth _____ Race _____

Driver's License Number _____ Issuing State _____

PLEASE CHECK ONE: <input checked="" type="checkbox"/>	<input type="checkbox"/> Class 1 LE	<input type="checkbox"/> Class 2LCO (Jailer)
	<input type="checkbox"/> Class 3SLE (Limited Duty)	<input type="checkbox"/> Class 1LECO (LEO/Jailer)
	<input type="checkbox"/> Reserve Appointment	<input type="checkbox"/> Coroner <input type="checkbox"/> Deputy Coroner

Commissioning Agency _____ Date _____

AFFIDAVIT OF BACKGROUND INVESTIGATION
I hereby attest that I have conducted a complete background investigation on the above officer. Below is a list of this officer's former law enforcement agencies contacted for terms of separation:

Date Contacted	Agency(s)	Contact Person

My background investigation concluded that this officer is of "Good Character" and does not have any disqualifications which would render the officer uncertifiable under the South Carolina Training Act, Section 23-23-60 and I hereby make application for certification.

A complete and current Criminal History Check has been conducted and charge(s):
 WERE NOT FOUND (no CHC / NCIC is required)
 WERE FOUND (attach CHC / NCIC showing disposition)

A complete and current Driving Record has been reviewed and Suspension(s) as a result of driving under the influence of alcoholic beverages or dangerous drugs, driving while impaired, reckless homicide, involuntary manslaughter, or leaving the scene of an accident:
 WERE NOT FOUND (no Driving Record is required)
 WERE FOUND (attach Driving Record showing suspensions)

Signature of Investigating Officer: _____
(Sign) _____ (Print Name)

Authorizing Signature for Department _____ / _____ Date: _____
(Print Name)

Sworn to and subscribed before me this _____ day of _____ Year _____

Signature of Notary Public for South Carolina _____ Print Name _____

My commission expires: _____



South Carolina Criminal Justice Academy Certification-Compliance



PERSONNEL CHANGE IN STATUS REPORT NOTIFICATION OF SEPARATION DUE TO MISCONDUCT

This form **MUST** be completed within **15 days** of the discovery of any event of misconduct which is determined to be "FOUNDED" by the agency or department. The Misconduct Report Form, Separation Supplement, and all documentation related to the misconduct must be forwarded to the Criminal Justice Academy's Certification Unit.

Reporting Department _____ Agency Phone # _____ Today's Date _____

Officer's Name _____ Academy ID # _____ Home Telephone # _____

Officer's Current Home Address _____ City/Town _____ Zip Code _____

PLEASE CHECK ONE: Class 1 LE Class 1LECO Class 2 LCO
 Class 3SLE (Limited Duty) Reserve Officer

(For any separation involving misconduct as defined in S.C. Reg. 37-025. Completion of the back of this form is REQUIRED)

Date of Separation: _____ (specify mo/day/yr)

_____ Termination **INVOLVING MISCONDUCT** as defined in S.C. Reg. 37-025

_____ Resignation **INVOLVING MISCONDUCT** as defined in S.C. Reg. 37-025

(Please indicate the nature of the misconduct by checking the appropriate selection below.)

<input type="checkbox"/>	Conviction, plea of guilty, plea of no contest or admission of guilt (regardless of withheld adjudication) to a felony, a crime punishable by a sentence of more than one year (regardless of the sentence actually imposed, if any) or a crime of moral turpitude in this or any other jurisdiction;
<input type="checkbox"/>	Unlawful use of a controlled substance;
<input type="checkbox"/>	The repeated use of excessive force in dealing with the public and/or prisoners;
<input type="checkbox"/>	Dangerous and/or unsafe practices involving firearms, weapons and/or vehicle which indicated either a willful or wanton disregard for the safety of persons;
<input type="checkbox"/>	Dangerous and/or unsafe practices involving firearms, weapons and/or vehicle which indicated either a willful or wanton disregard for the safety of property;
<input type="checkbox"/>	Physical or psychological abuses of members of the public and/or prisoners;
<input type="checkbox"/>	Misrepresentation of employment-related information;
<input type="checkbox"/>	Dishonesty/untruthfulness with respect to his/her employer;

Only events which have been substantiated by investigation have been reported above. The facts & information herein are true & accurate to the best of my knowledge. All investigation report(s), statements, test results, audio/video records, or other documentation related to the misconduct are attached to this Misconduct Report Form.

Employing Agency Head (Chief, Sheriff, Director) _____ Date _____

Print Name _____ Official Title _____



SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY

Certification Compliance Unit

5400 Broad River Road

Columbia, South Carolina 29212

Phone: (803) 896-7802 Fax: (803) 896-7803



911 Personnel Change In-Status - Hire Form

Reporting Department _____ Phone # _____ Today's Date _____

911 Operator's Name (First, Middle, Last) _____ SS# or Academy I.D. _____

Male

Date of Birth _____ Race _____ Female

The above 911 Operator was hired on: _____
Date of Hire

Affidavit of Background Investigation

I hereby attest that I have conducted a complete background investigation on the above 911 operator. My background investigation concluded that the above 911 operator does not have any conviction for any criminal offense that carries a possible sentence of more than one year and I, hereby, make application for 911 certification.

Signature of Investigating Officer: _____

Authorized Signature for Department: _____ Date: _____

Sworn to and subscribed before me this
_____ Day of _____ Year _____

Signature of Notary Public for South Carolina _____

My commission expires: _____

Revised 8/15

SECTION II: ROSTER OF OFFICER(S) RENEWING CERTIFICATION

The listed officer(s) have completed or exceeded the minimum hours and required coursework for re-certification as a law enforcement officer, pursuant to South Carolina Code Section 23-23-60(C) 23-23-50(A) 37-010, as amended, as well as met the requirements for law enforcement vehicle training as required in Regulation 37-014, 015, 017, 018.

- CLASS 1: CDV & Legal each yr., plus In-Service Hrs. for a total 40 hours
- CLASS 1 LECO: CDV & Legal each yr., plus 120 hours of In-Service
- CLASS 2: In-Service - 120 hours
- CLASS 3: One Legal each year
- IN-SERVICE HOURS = Can use any Law Enforcement Related Training
- Separate Certification Hours: Classes taken at CJA that grant you a Certification (other than Basic Training)

GDV Year Viewed = (example: 2016, 2017, 2018) **** Legal Year Viewed = (example: 16/17, 17/18, 18/19)

OFFICER'S NAME	Academy I.D.#	CERT CLASS	CRIMINAL DOMESTIC VIOLENCE HRS.			LEGAL HOURS HRS.			IN-SERVICE & EVO Hrs.	Separate Certification Hours
			M/D/Y	MAKE UP	Year Viewed	M/D/Y	MAKE UP	YEAR Viewed		
			Yr.1	<input type="checkbox"/>		Yr.1	<input type="checkbox"/>			
			Yr.2	<input type="checkbox"/>		Yr.2	<input type="checkbox"/>			
			Yr.3	<input type="checkbox"/>		Yr.3	<input type="checkbox"/>			
			Yr.1	<input type="checkbox"/>		Yr.1	<input type="checkbox"/>			
			Yr.2	<input type="checkbox"/>		Yr.2	<input type="checkbox"/>			
			Yr.3	<input type="checkbox"/>		Yr.3	<input type="checkbox"/>			
			Yr.1	<input type="checkbox"/>		Yr.1	<input type="checkbox"/>			
			Yr.2	<input type="checkbox"/>		Yr.2	<input type="checkbox"/>			
			Yr.3	<input type="checkbox"/>		Yr.3	<input type="checkbox"/>			

SECTION III: SCCJA INSTRUCTOR HOURS

The following S.C. Criminal Justice Academy accredited instructor(s) have completed or exceeded the minimum of twelve (12) hours of instructional activities required annually.

OFFICER'S NAME	Academy I.D. #	CHECK REPORTING YEARS	ENTER NO. OF INSTRUCTOR TEACHING HRS.							
			001	002	003	004	005	006	007	
		<input type="checkbox"/> 1-3								
		<input type="checkbox"/> 1-3								

INSTRUCTOR CODES
 CODE 001 - BASIC INST.
 CODE 002 - DEFENSIVE TACTICS INST.
 CODE 003 - DRIVING INST.
 CODE 004 - FIREARMS
 CODE 005 - OC INST.
 CODE 006 - SPEED MEASURING DEVICE INST.
 CODE 007 - GROUND DEFENSE INST.



SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY

5400 Broad River Road
Columbia, South Carolina 29212-3540



MRN Mandatory Retraining Notification

SECTION I: ATTESTATION

AGENCY:				
REPORTING FOR:	YEAR 1 <input type="checkbox"/>	YEAR 2 <input type="checkbox"/>	YEAR 3 <input type="checkbox"/>	YEARS 1-3 <input type="checkbox"/>
Certification Renewal Date: Click here to enter a date.				

By my signature hereto, I certify and make an official statement, that pursuant to South Carolina Code Section 23-23-60(C), as amended, the officer(s) identified on SECTION II of the Mandatory Retraining Notification Form, have completed the claimed number of hours and required coursework as reported herein and evidence of such completion is maintained in the official records of the employing agency and is subject to verification by the South Carolina Criminal Justice Academy or its designated representative.

I further certify and hereby make an official statement, that the officer(s) identified on SECTION III of the SCCJA Instructor Accreditation Maintenance Report Form, are in compliance with the Instructor Re-Accreditation Policy of the South Carolina Criminal Justice Academy, and evidence of such completion is maintained in the official records of the employing agency and is subject to verification by the South Carolina Criminal Justice Academy or its designated representative.

SIGNATURE OF EMPLOYING AGENCY REPRESENTATIVE

DATE

Sworn & Subscribed before me

This _____ day of _____, 20____

My Commission Expires: _____

NOTARY PUBLIC FOR SOUTH CAROLINA

Standards/Testing

Departmental Lesson Plan Format -- WORD Document that can be sent via email

Departmental LP Cover Sheet and Approval Form -- WORD Document that can be sent via email

Institutional Provider Application for Course Approval -- WORD Document that can be sent via email

Accommodations Request for Applicants with Disabilities – PDF that can be sent via email

Application for Special Test Accommodations – PDF that can be sent via email

**DEPARTMENTAL TRAINING OUTLINE
COVER SHEET**

CLASS TITLE:	LESSON PLAN #:	STATUS (New/Revised):

TRAINING DEPARTMENT:	TIME ALLOCATION:

PRIMARY INSTRUCTOR:	ALT. INSTRUCTOR:	LESSON PREPARED BY:

DATE LESSON PLAN PREPARED:

LESSON PLAN PURPOSE:

EVALUATION PROCEDURES:

TRAINING AIDS, SUPPLIES, EQUIPMENT, SPECIAL CLASSROOM/INSTRUCTIONAL REQUIREMENTS:

TRAINING PERFORMANCE OBJECTIVES

CLASS TITLE:

LESSON PLAN #:

STATUS (New/Revised):

--	--	--

TRAINING DEPARTMENT:

INSTRUCTOR:

--	--

PERFORMANCE OBJECTIVES:

<p>1.</p>

**TRAINING OFFICER
INSTRUCTIONAL OUTLINE**

CLASS TITLE:

LESSON PLAN #:

STATUS (New/Revised):

--	--	--

TRAINING DEPARTMENT:

INSTRUCTOR:

--	--

**INSTRUCTIONAL CONTENT
BIBLIOGRAPHY**

CLASS TITLE:	LESSON PLAN #:	STATUS (New/Revised):

TRAINING DEPARTMENT:	INSTRUCTOR:

LESSON PLAN CHECKLIST

Class Title:

Instructor(s):

Proposed Implementation Date:

--	--	--

Please check off the following as you complete them, if applicable, to ensure your lesson plan is ready for submission:

- Cover sheet.
- Performance Objectives.
- Lesson plan narrative in proper three-step format.
- Bibliography sheet reflecting research sources.
- Paper copies of all handouts, PowerPoint presentations, and overhead transparencies.
- Copies of manuals (if applicable).
- Test Question Submittal/Change/Deletion forms:
 - Correct answers indicated.
 - Indication of performance objective it supports (there must be at least one test question for each performance objective).
 - Pre-test and post-test for all accredited instructional areas.
- Copy of all practical problem scenarios (if applicable).
- Safety rules/regulations (Ranges, PR-24, etc.).
- A class schedule identifying instructor name, title of Unit lesson plans, and instructor contact hours.
- All new, unapproved lesson plans submitted together.
- Checklist attached to front of lesson plan/package.

Signature of Primary Instructor



**South Carolina Criminal Justice Academy
Standards Unit
Phone 803-896-7801 | Fax 803-896-8746**

**Departmental Lesson Plan Cover Sheet/Review And Approval Notification
Please Print in Black Ink or Type**

Department/Agency Name: _____
 Complete Mailing Address: _____
 Contact's E-Mail Address: _____
 Telephone Number: _____ Fax Number: _____
 CJA Lesson Plan Number: _____ Lesson Plan Hours: _____
 Lesson Plan Title: _____

1. Instructor
 Instructor's signature _____
 Instructor's Name (Printed): _____ Academy ID#: _____
 Must be a current CJA accredited Basic Instructor or Specific Skills Instructor. If this is a specialized area (DT, Firearms, OC, Driving, PPCT, etc.) the instructor must hold a current CJA accreditation for the specialized area.

2. Author
 Author's Signature: _____
 Author's Name (Printed): _____ Academy ID#: _____
 Must be a current CJA accredited Basic Instructor. If this is a specialized area (DT, Firearms, OC, Driving, PPCT, etc.) the author must hold a current CJA accreditation for the specialized area.

3. Chief/Sheriff/Agency Head
 Chief/Sheriff/Agency Head Signature: _____
 Chief/Sheriff/Agency Head (Printed): _____ Date: _____

4. Legal Sufficiency
 You have the option to let your Legal Representative OR your Chief/Sheriff/Agency Head sign. Please sign 4A OR 4B.

4A. Department Legal Representative – By signing above you are indicating that the training content meets legal sufficiency requirements.
 (Definition of Legal Sufficiency: To satisfy requirement that a lesson plan “meets legal sufficiency requirements,” an attorney licensed to practice law in South Carolina must certify that all legal references contained within lesson plan (including but not limited to text, student handout materials, and visual aids) are accurate based on current law. At a minimum, certifying attorney shall ensure that all statutory references and citations are accurate and reflect most current version as enacted by respective legislative body; all case law references and citations reflect latest opinion (published or unpublished); and all departmental policy references are accurate and all said policy references comport with applicable state and federal laws. Finally, certifying attorney shall ensure that any discussion of state law, federal law, or departmental policy accurately comports with respective state law, federal law, or departmental policy whether said discussion appears in text, student handout materials, visual aids, or any other material associated with lesson plan)
 Legal Representative's Signature: _____
 Legal Representative's Name (Printed): _____ Date: _____

4B. Chief/Sheriff/Agency Head - By signing you are indicating that the training content meets legal sufficiency requirements, as defined above. You understand that it is recommended that you have a Legal Representative review and sign this lesson plan. However, you have chosen not to employ a Legal Representative. As such, you are assuming personal liability for the contents of the lesson plan. _____ (initial). You understand that the SC Criminal Justice Academy (Academy) has not and will not render an opinion as to the legal sufficiency of this lesson plan. Furthermore, you agree to personally reimburse any legal costs the Academy may incur as a result of any legal action for this lesson plan, because of your decision not to employ a Legal Representative to review this lesson plan.
 Chief/Sheriff/Agency Head Signature: _____
 Chief/Sheriff/Agency Head (Printed): _____ Date: _____

Approved: <input type="checkbox"/>	Lesson plans are approved for CLEE credit only and are valid for 2 years from date of approval. Academy approval of lesson plan does not constitute endorsement of training, does not grant instructor status, nor does Academy accept responsibility for content.
Denied: <input type="checkbox"/>	

CJA Standards Program
 Coordinator: _____ Date: _____
 NOTE: The actual lesson plan, PowerPoint presentation, handouts, etc. must be maintained in your files along with this approval letter. The lesson plan should be in the format taught by the Academy in the Basic Instructor Program.
 Rev. 01/2016

CJA Lesson Plan Number: _____ Lesson Plan Hours: _____
Lesson Plan Title: _____

Brief Course Description and Purpose of Training:

Performance Objectives (Please continue on separate sheet if necessary):



**South Carolina Criminal Justice Academy
Standards Unit
5400 Broad River Road
Columbia, SC 29212
(803) 896-7801
(803) 896-8746 (fax)**

Application for Institutional Provider and Course Approval

Institutional Provider/

Agency Name: _____

Representative: _____

Title/Position: _____

Mailing Address: _____

City/State/Zip: _____

E-Mail Address: _____

Telephone Number: _____

Institutional Provider #: _____

Fax Number: _____

Title of Training: _____

Date Submitted: _____

CJA Lesson Plan # _____

of Contact Hours: _____

- Attach:**
1. Topical Outline including Performance Objectives
 2. Course Schedule of Contact Hours showing hourly break down of instruction (course registration, lunch, breaks, and business meetings are not considered as instructional contact);
 3. Name and professional/educational background of all instructional personnel. (A marketing brochure is acceptable if it provides information as described in items 1, 2, and 3.)

Indicate the type of agency/institution you represent.

- | | | |
|---|---|---|
| <input type="checkbox"/> Federal Law Enforcement | <input type="checkbox"/> State Law Enforcement | <input type="checkbox"/> National Law Enforcement |
| <input type="checkbox"/> County Law Enforcement | <input type="checkbox"/> State Law Enforcement Assoc | <input type="checkbox"/> National Law Enforcement Assoc |
| <input type="checkbox"/> Judicial | <input type="checkbox"/> University | <input type="checkbox"/> Technical College |
| <input type="checkbox"/> Consultancy/Contractual (See **) (Fee Based) | <input type="checkbox"/> Private Training Provider (See **) (Fee Based) | <input type="checkbox"/> Other: Specify (See **) |

****** If you provide training on a contractual fee basis, attach two letters of recommendation from previous clients who have benefited from your training within the last 12 months. Submission mandatory for initial approval consideration. If you are already approved and have your Institutional Provider # you do not have to resubmit these letters.

List the states that have approved your training for law enforcement personnel:

State	Name Of Course	Date Approved	State/Regulatory Agency Granting Approval

INSTITUTIONAL ASSURANCE STATEMENT

The undersigned authorized representative hereby warrants to and assures the South Carolina Criminal Justice Academy in consideration of the granting of Continuing Law Enforcement Education (CLEE) credits, that they will comply with the following conditions:

1. The Institutional Provider will maintain the lesson plan, to include performance objectives and testing materials, that meets current accepted professional/occupational standards that have been determined by Institutional Provider to be legally and content defensible.
2. The Institutional Provider will keep on file biographical and professional information for all instructors who provide instruction in this course and warrants that said instructors are professionally and educationally qualified to provide instruction in said course.
3. The Institutional Provider must maintain all training documentation along with this approval notice for 2 years from date of approval.

Signature

Date

Academy Use Only

Approved by: _____
CJA Standards Program Coordinator

Date Approved: _____



**South Carolina Criminal Justice Academy
Instructional Standards & Support Section
Academic Testing
5400 Broad River Road
Columbia, SC 29212
803-896-7956
803-896-8746 (fax)**

Application for Written Test Accommodations
Please print legibly (black or blue ink only) or type.

PART I

This completed form and required documentation must be mailed to the address as listed above. Requests must be supported by documentation certifying the disability from a qualified professional appropriate for evaluating the disability. Review of a request for test accommodations will be deferred until the necessary documentation is submitted. Attach additional pages as necessary.

Accommodations are requested for the following class: _____

Date Class Begins: _____

Name: _____

Last

First

Middle

Mailing Address: _____

Address

City

Zip

Home Phone Number: _____

Work Phone Number: _____

Social Security Number: _____

Nature of Disability

- | | |
|---|--|
| <input type="checkbox"/> Chronic Health Problem | <input type="checkbox"/> Temporary Accidental Injury |
| <input type="checkbox"/> Hearing Disability | <input type="checkbox"/> Visual Disability |
| <input type="checkbox"/> Learning Disability | <input type="checkbox"/> Physical Disability |

To document your need for accommodation as completely as possible, please attach, in addition to professional documentation, a personal statement describing in detail your disability and its impact on your ability to meet all the Academy's written test requirements.

How long ago was your disability first professionally diagnosed? The most recent documentation concerning your disability must be included with this request.

- less than 1 year 1-2 years 2-4 years 5 or more years

Have you ever been diagnosed with a disability, but did not require an accommodation? Yes No

If so, what disability? _____

What accommodation(s) are you requesting? Please explain how each accommodation request will assist you in alleviating your disability.

Do you require wheelchair access at the examination facility? Yes No

Have you ever received a classroom or test accommodation(s) in the past?

Secondary or elementary school Yes No Year(s): _____

If yes, accommodation(s) received:

College Yes No Year(s): _____
If yes, accommodation(s) received:

Post Graduate Yes No Year(s): _____
If yes, accommodation(s) received:

Prior attendance at South Carolina Criminal Justice Academy: Yes No Year(s): _____

If yes, accommodation(s) received:

Certification and Authorization

I certify that the above information is true and accurate. If the test accommodations granted to me include a deviation from the standard testing time scheduled, I agree that from the time I begin the examination until I have completed it I will not communicate in any way with any other individuals taking the examination, nor will I communicate in any way with any of these individuals about the content of the examination.

Signature: _____ Date: _____

I understand the South Carolina Criminal Justice Academy will use the information obtained by this authorization to determine eligibility for a reasonable accommodation with regard to examination procedures. If clarification and/or further information regarding my disability or requested accommodation is needed, I authorize the South Carolina Criminal Justice Academy to contact the professional(s) who diagnosed the disability and I authorize those entities to communicate with the South Carolina Criminal Justice Academy for the purpose of providing such clarification and/or further information. I understand that false information contained in this application may be cause for loss of a certification or denial of possible certification.

Signature: _____ Date: _____

PART II

Please print legibly (black or blue ink) or type.

Requests shall be supported by documentation certifying the disability from a qualified professional appropriate for evaluating the disability.

Practitioner's Name: _____
Last First Middle

Office Address: _____
Address City Zip

Office Phone Number: _____ Office Fax Number: _____

Type of Practice _____

Patient's Full Name: _____
Last First Middle

Date Patient First Consulted: _____ Date Patient Last Seen: _____
mm/dd/yyyy mm/dd/yyyy

Diagnosis of Disability: _____

Name of Test(s) Used: _____

Length of Time with Condition: _____

Recommended Accommodation for Written Testing: _____

Please note:

I hereby certify that the above information is true and is given pursuant to the authorization to release information by my patient. Under penalties of perjury, I declare that the foregoing statements and those in any accompanying documents or statements are mine and that they are true. I hereby certify that I personally examined and evaluated the patient whose name appears on this form and, as a result of that evaluation, that I have completed this portion of this application and that I may be asked to verify the above information at any time.

Signature: _____

Date: _____

Practitioner's License Number: _____

Submit this form to the following address:

**South Carolina Criminal Justice Academy
Instructional Standards & Support Section
Attention: Manager, Academic Testing Unit
5400 Broad River Road
Columbia, SC 29212**

Advanced Training

Field Training Officer Course Request Form – Electronic Form

Field Training Officer Course Request Form

Please fill in the form below.

Host of Training *

Agency Name

Location of Class *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Course Dates (if more than 1 class, please fill out a separate form for each class) *

mm/dd/yyyy-mm/dd/yyyy

Mailing Address for tests *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Number of Tests Requested: *

Primary Instructor's Name *

First Name

Last Name

Primary Instructor's Academy ID #

Primary Instructor's E-mail *

ex: myname@example.com

Primary Instructor's Phone Number *

(Area Code)Phone number

Secondary Instructor's Name

First Name

Last Name

Secondary Instructor's Academy ID #

Secondary Instructor's E-mail

Field Training Officer Course Request Form

Secondary Instructor's Phone Number

(Area Code) Phone Number

Additional Instructor's Academy ID #

Additional Instructor's E-mail

Additional Instructor's Phone Number

(Area Code) Phone Number

Traffic Safety

- SMD Course Request Form – Electronic Form
- SMD Road Proficiency Test Form – PDF that can be sent via email
- SMD Instructor Road Proficiency Submittal Form – Electronic Form
- SMD Instructor Recertification – Electronic Form
- SFST Course Request Form – Electronic Form
- SFST Proficiency Form – Electronic Form
- SFST Instructor Recertification Form – Electronic Form

SMD Course Request Form

Today's Date *

03	22	2017	
Month	Day	Year	

Course Date(s) *

Type of Course *

Number of Tests Requested *

Course Location *

Classroom Physical Location

Street Address

City

State / Province

Postal / Zip Code

Country

Primary Instructor's Information *

First Name

Last Name

Primary Instructor's Email Address *

Primary Instructor's Phone Number *

 -

Area Code Phone Number

Address *

Department

Street Address

City

State / Province

Postal / Zip Code

Country

Assistant Instructor's Name *

First Name

Last Name

Assistant Instructor's Email Address *

Assistant Instructor's Phone Number *

 -

Area Code Phone Number



South Carolina Criminal Justice Academy

Traffic Safety Unit

Speed Measuring Device Road Proficiency Field Testing Forms Revised 11/2013

Course Type/Location: _____
Course Date(s): _____
Student Name/Department: _____





SC Criminal Justice Academy

Traffic Safety Unit

Police Traffic Speed-Measuring Device Operator Road Proficiency Testing Booklet

Instructions:

The Speed-Measuring Device Instructor should administer the road proficiency portion of the Basic Police Traffic Speed-Measurement Operator course to the Speed-Measurement operator trainee/student within the prescribed two (2) to six (6) weeks from the conclusion date of the classroom portion of the course as set forth in the CJA Policy and Procedures (General Training Requirements). The instructor should evaluate the Speed Measuring Device being used for operational condition. In the event the instrument fails either internal or external tests or has missing parts, the condition should be noted and no road test performed with that instrument.

On page two (2) there is a demonstrated process for calculating the average error rating for the student's visual speed estimates. On page three (3) there is an evaluation section for the standard front antenna RADAR devices. If this is the case, the instructor will only need to complete this section. For the RADAR instruments designed with Same/Opposite Direction, Digital Signal Processing, Time/Distance, or Dual Antenna capabilities, the instructor should complete the appropriate sections. In the event the student advises the instructor that these available functions will not be applied for enforcement purposes, the instructor can omit those applications, but must note clearly in the instructor comments area this fact. **At a minimum, the student must show proficiency on a front antenna Radar in both stationary and moving modes to be considered satisfactorily proficient in Radar Operation.** Lidar proficiency testing is included on page 10 of this form, and must be completed for any Lidar Operator/Recertification or any SMD Operator course.

If the student fails to demonstrate Acceptable levels of performance with the visual speed estimates, the instructor should document the deficiencies in the comments section and reschedule the student for further practice and testing (original certifications only). Upon completion of the road proficiency testing, the data from this form should be submitted to Chris Kendall at the SC Criminal Justice Academy Traffic Safety Unit. This must occur by the conclusion of the sixth week of the course. Any proficiency forms received after the sixth week will be considered failures. Make sure the course type/location and dates are clearly written on the cover sheet. **SMD RECERTIFICATION PROFICIENCIES ARE DUE WITHIN TWO WEEKS OF THE COURSE TEST DATE, AND THERE ARE NO RETESTS FOR RECERTIFICATION FAILURES.**



SCCJA Speed-Measuring Device Road Proficiency Test Form

Course type/location: _____ Course Dates: _____

Student Name: _____ ACADIS#/Academy ID#: _____

Student Agency: _____ County: _____

Test Date: _____ Test Location: _____

Traffic Volume: _____ Years of Radar/Lidar Experience: _____

Radar/Lidar Type (Circle One or more):

Applied Concepts, Inc.

- Stalker (Sta. Ka)
- Stalker (Mov Ka)
- Stalker (Dual Ka)
- Stalker (Dual SL)
- Stalker (DSR)
- Stalker (ATR)
- Stalker (Basic)
- Stalker XLR (Lidar)

Decatur Electronics

- Genesis I (X)
- Genesis I (K)
- Genesis GHD (K)
- Genesis II (Ka)
- Genesis – VP/Directional Scout

Kustom Signals, Inc.

- Eagle I/II (K)
- Eagle I/II (Ka)
- Golden Eagle (K)
- Golden Eagle II (Ka/K)
- Falcon (K)
- Raptor RP-1 (Ka)
- Talon II (Ka)
- HR-12 (K)
- Pro-1000DS (K)
- ProLaser III (Lidar)
- ProLaser 4 (Lidar)
- Pro-Lite + (Lidar)

MPH Industries

- BEE III (K/Ka)
- Bee 36A (X, K, Ka)
- Bee-36 (Ka)
- K-55 (X, K)
- K-55 (X)
- Python I (X, K, Ka)
- Python II (X, K, Ka)
- Ranger EZ³ (K)
- Speedgun (K)
- Enforcer (Ka)
- Z-25, Z-35 (K)
- Python Series II (X, K, Ka)
- Python Series III (X,K,Ka)

Laser Technologies, inc

- LTI 20/20 TruCAM (Lidar)
- TruSpeed LR (Lidar)
- Ultralyte 100/200 (Lidar)
- Ultralyte LR B (Lidar)

Laser Atlanta, LLC

- SpeedLaser (B/R/S/T)

Other RADAR Type: _____

RADAR Model Serial Number: _____

RADAR Condition: _____



SCCJA Speed-Measuring Device Road Proficiency Test Form

Proper RADAR Set-Up; ABC's (Check One):

	<u>Acceptable</u>	<u>Unacceptable</u>
Antenna(s):		
Box:		
Current:		

Proper RADAR Testing Procedure (Check One):

	<u>Acceptable</u>	<u>Unacceptable</u>
Internal test:		
Tuning Fork(s):		
Moving:		
Stationary:		

Road Proficiency Visual Estimate Test Scoring:

<u>Stationary</u>				<u>Moving</u>			
Target Vehicle	Estimate	Actual	Error MPH	Target Vehicle	Estimate	Actual	Error MPH
1	40	45	5	1	45	45	-
2	45	45	-	2	42	45	3
3	43	45	2	3	50	45	5
4	42	45	3	4	46	45	1
5	45	45	-	5	47	45	2
6	42	45	3	6	45	45	-
7	44	45	1	7	45	45	-
8	45	45	-	8	41	45	4
9	40	45	5	9	45	45	-
10	45	45	-	10	45	45	-

Average Error MPH Stationary: _____ 1.9

Average Error MPH Moving: _____ 1.5

Average Error MPH Overall: _____ 1.7

Simply add the error totals for each side then divide by ten. This is done for each mode separately. Then add both stationary and moving error totals and divide by 2. The student must not exceed ± 3.0 MPH average in EACH TESTED MODE (e.g. stationary-front, moving-front, moving-front-fastest, etc.) or it is considered unsatisfactory.



SCCJA Speed-Measuring Device Road Proficiency Test Form

Visual Estimate Tests

Front Antenna Only:

<u>Stationary</u>				<u>Moving</u>			
Target Vehicle	Estimate	Actual	Error MPH	Target Vehicle	Estimate	Actual	Error MPH
1				1			
2				2			
3				3			
4				4			
5				5			
6				6			
7				7			
8				8			
9				9			
10				10			

Average Error MPH Stationary: _____

Average Error MPH Moving: _____

Average Error MPH Overall (add above two lines together and divide by 2): _____

Instructor Comments:

Instructor Signature: _____ Date: _____

Student Signature: _____ Date: _____



SCCJA Speed-Measuring Device Road Proficiency Test Form

Visual Estimate Tests

Rear Antenna Only:

Stationary				Moving			
Target Vehicle	Estimate	Actual	Error MPH	Target Vehicle	Estimate	Actual	Error MPH
1				1			
2				2			
3				3			
4				4			
5				5			
6				6			
7				7			
8				8			
9				9			
10				10			

Average Error MPH Stationary: _____

Average Error MPH Moving: _____

Average Error MPH Overall (add above two lines together and divide by 2): _____

Instructor Comments:

Instructor Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____



SCCJA Speed-Measuring Device Road Proficiency Test Form

**Dual Antenna/Same Direction/Digital Signal/Time-Distance
RADAR Instrument Familiarity**

This section is provided for the purpose of testing the student who proposes to operate a RADAR instrument that has one or more of the above listed functions:

Box (Counter) Functions:

Acceptable

Unacceptable

Stopwatch/Range Select Switch (Explain proper use of the stopwatch):		
Distance Switch (Explain use of the thumb wheels in the stop watch mode):		
Slower Indicator (Explain when to utilize "slower mode"):		
Antenna Direction Indicators (Explain Function)		
Display Target Speed (Explain D.T.S. only/display time in seconds):		

Remote Control Functions:

Front/Rear Switch (Explain the use of the rocker switch):		
Faster/Slower Button (Explain the use of the button):		
Target Verification Window (Explain the target verification speeding up and/or slowing down):		
Lock-Release / Start-Stop (Explain function):		

Instructor Comments:



SCCJA Speed-Measuring Device Road Proficiency Test Form

Rear Antenna (Same Direction)

Moving

Target Vehicle	Estimate	Actual	Error MPH
1			
2			
3			
4			
5			

Add these together and divide by 5.

Front Antenna (Same Direction)

Moving

Target Vehicle	Estimate	Actual	Error MPH
1			
2			
3			
4			
5			

Add these together and divide by 5.

Average Error MPH Front Antenna: _____

Average Error MPH Rear Antenna: _____

Average Error MPH Overall (add above two lines and divide by 2): _____

Instructor comments:



SCCJA Speed-Measuring Device Road Proficiency Test Form

Average Speed Calculations for the Stopwatch Function:

Stopwatch Set-up (check one)

	<u>Acceptable</u>	<u>Unacceptable</u>
Stopwatch Test:		
Enter proper distance:		
Familiarity with Time/Distance Principles:		

Calculations:

Target Vehicle	Distance	Time	Estimate	Actual Speed	Error MPH
1					
2					
3					
4					
5					

Add these together and divide by 5.

Average Error: _____

Instructor Comments:

Instructor Signature: _____ Date: _____

Student Signature: _____ Date: _____



SCCJA Speed-Measuring Device Road Proficiency Test Form

DSP – Fastest Mode Front Antenna

Stationary

Moving

Target Vehicle	Estimate	Actual	Error MPH	Target Vehicle	Estimate	Actual	Error MPH
1				1			
2				2			
3				3			
4				4			
5				5			

DSP – Fastest Mode Rear Antenna

Stationary

Moving

Target Vehicle	Estimate	Actual	Error MPH	Target Vehicle	Estimate	Actual	Error MPH
1				1			
2				2			
3				3			
4				4			
5				5			

Average Error MPH Stationary (F&R, divide by 10): _____

Average Error MPH Moving (F&R divide by 10): _____

Average Error MPH Overall (Add the above two lines, divide by 2): _____

(Note: If only using front antenna, divide stationary by 5 and moving by 5)

Instructor Comments:

Instructor Signature: _____ Date: _____

Student Signature: _____ Date: _____



SCCJA Speed-Measuring Device Road Proficiency Test Form

Lidar Field Proficiency Testing

	<u>Pass</u>	<u>Fail</u>	<u>Re-test</u>
Site Selection:			
Officer Safety:			
Operation Safety:			
Conducts Internal Accuracy checks:			
Demonstrates Proper Sight Alignment:			
Demonstrates Valid Range Accuracy:			
Articulates Tracking History of Target Vehicle:			

Lidar Visual Estimates

Target Vehicle	Visual Estimate	Actual Speed	Error +/-
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Instructor Comments: _____ **Average Error:** _____

Instructor Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____

NOTE: Student(s) failing to meet field proficiency testing standards (ORIGINAL CERTIFICATIONS ONLY) should be rescheduled for further practice sessions. If, after a third failed attempt at meeting standard, the student should be recycled through the classroom portion of the Speed-Measuring Device Operator Training course. The Academy Program Director should be notified of student recycles. SMD RECERTIFICATIONS ARE GIVEN ONLY ONE ATTEMPT AT PASSING THE PROFICIENCY WITH NO RETESTS.

Speed Measuring Device Proficiency Submittal Form

Please fill the name field exactly how it is in Acadls. Nicknames or any other form will not be accepted.

Student's Name *
First Name Last Name Suffix

Student's Academy ID *

Student's Department *

Student's E-mail *

Student's Phone Number

Course Title *

Classroom Course Location *

Course Date(s) *

Road Proficiency Date *
Month Day Year

Radar Module

NOTE: Enter "N/A" if a field does not apply.

Radar Functionality *

- Student properly demonstrated Internal Testing
- Student properly demonstrated Tuning Fork tests
- Student adequately explained and demonstrated use of applicable Remote Control Functions (e.g., Hold, Front/Rear Antenna Switch, Faster/Slower Button, etc.)
- Student adequately explained and demonstrated knowledge of Radar Instrument Indicators/modes
- Student satisfactorily explains tracking history as it pertains to Radar Operation.
- None Applicable (use for LIDAR ONLY proficiencies).

Front Antenna *

Stationary (Average Error)

*

Moving (Average Error)

*

Overall Average Error

Rear Antenna *

Stationary (Average Error)

*

Moving (Average Error)

*

Overall Average Error

Same Direction *

Front (Average Error)

*

Rear (Average Error)

*

Overall Average Error

Fastest Mode – Front/Rear *

Stationary (Average Error)

*

Moving (Average Error)

*

Overall Average Error

Stopwatch Mode/ASC Mode

Enter "N/A" if field does not apply.

Overall Average Error *

Course distance (in feet) *

Stopwatch/ASC Functionality *

- Familiar with time/distance principles and speed calculations.
- Familiar with stopwatch mode settings and remote operations.
- Stopwatch accuracy testing explained/demonstrated.
- None Applicable

Lidar Module

Enter "N/A" if field does not apply.

Overall Average Error *

Lidar Functionality *

- Student satisfactorily explains Lidar site selection and operational considerations.
- Student satisfactorily demonstrates Lidar setup and testing procedures (e.g., sight alignment).
- Student satisfactorily explains tracking history as it pertains to Lidar Operation.
- None Applicable (used for RADAR ONLY proficiencies).

SMD Instructor Information

SMD Instructor *

<input type="text"/>	<input type="text"/>
First Name	Last Name

Instructor's Department *

Instructor's E-mail *

Instructor's Phone Number *

Submitter's Information (if different from SMD Instructor)

<input type="text"/>	<input type="text"/>
First Name	Last Name

Submitter's Department

Submitter's E-mail

SMD Instructor Recertification Form

South Carolina Criminal Justice Academy

Please fill the name field exactly how it is in Acadis. Nicknames or any other form will not be accepted.

Instructor's Name *

<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	Middle Name	Last Name

Academy ID Number *

Agency Name *

E-Mail Address *

Phone Number *

<input type="text"/>	-	<input type="text"/>
Area Code		Phone Number

"In order for a Speed Measuring Device Instructor to maintain Instructor Certification, he/she must teach at least three (3) SMD-related courses/recertification courses during the three (3) year certification period. An Instructor who maintains his/her Speed Measuring Device Instructor certification will automatically be recertified as a Speed Measuring Device Operator." - SCCJA SMD Policy

Please provide the requested information about your SMD Instructor activities. *Please note:* If you have assisted with an SMD Instructor Class (SCCJA) by conducting proficiencies during that class, you may count that class as one of your instruction periods. This does not apply to any other proficiencies you have conducted in the field.

If you do not meet the recertification teaching requirements, you must attend one of the two available SMD Instructor Recertification courses at the SCCJA.

Type of Instruction #1 *

Date(s) & Course Location *

Type of Instruction #2 *

Date(s) & Course Location *

Type of Instruction #3 *

Date(s) & Course Location *

The claimed courses taught may be researched and scrutinized for program integrity and quality control. Your submission of this form indicates that all of the information contained herein is accurate and true under penalty of decertification. Please understand that your new certificate and the update to your ACADIS training record may not appear until after January 1, 2016.

South Carolina Criminal Justice Academy

Traffic Safety Unit

DUI Detection and Standardized Field Sobriety Testing Course Request Form

ATTENTION: All Requests Must Be Received A Minimum of 14 Business Days Before Start of Class!

When you have completed this form submit to SCCJA Traffic Safety Unit. You will receive a confirmation e-mail within 48 hours advising that the traffic safety unit has received the form.

Hosting Agency:

Address of Hosting Agency:

Street Address
Street Address Line 2
City
State / Province
Postal / Zip Code
Country

Name of place where training will be conducted :

Address of place where training will be conducted:

Street Address

Street Address Line 2

City State / Province

Postal / Zip Code Country

United States

Lead Instructor's Name:

Lead Instructor's Agency:

Address where testing materials can be sent:

Street Address

Street Address Line 2

City State / Province

Postal / Zip Code Country

United States

Lead Instructor's Phone Number

Area Code Phone Number

Lead Instructor's E-mail Address:

ex: myname@example.com

Date Course Starts:

Month Day Year

Date Course Ends:

Month Day Year

Time of Class: :

Hour Minutes AM

Course Hours

ex: 23

Number of Total Students:

ex: 23

Number of spots held for hosting agency:

ex: 23

The South Carolina Criminal Justice Academy Traffic Safety Unit is now utilizing Preliminary Breath Testing Devices (P.B.T.) for the Wet Lab/Drinking Lab portion of the Standardized Field Sobriety Testing course. These instruments will be loaned to the hosting agency for the dates of the course if needed.

Does the lead instructor need a P.B.T. provided from the SCCJA for the wet lab/drinking lab? Yes No

Does the lead instructor need Manuals provided from the SCCJA? Yes No

Note: If you are experiencing difficulty with the electronic submittal, you can save the form and send it via email to TLBarber@sccja.sc.gov or send it by mail to:

SCCJA Registration Unit
 Attn: Taylor L. Barber
 5400 Broad River Rd.
 Columbia, SC 29212

Heading

Standardized Field Sobriety Test Proficiency

Participant Examination

Please fill the name field exactly how it is in Acadis. Nicknames or any other form will not be accepted.

Officers Name *

<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	Middle Initial	Last Name

Agency Name *

Officer's Academy ID Number *

Horizontal Gaze Nystagmus

	Yes	No
Remove Glasses	<input type="checkbox"/>	<input type="checkbox"/>
Stimulus Held in Proper Position (12-15" from nose, just above eye level)	<input type="checkbox"/>	<input type="checkbox"/>
Check Pupil Size & Resting Nystagmus	<input type="checkbox"/>	<input type="checkbox"/>
Check Equal Tracking	<input type="checkbox"/>	<input type="checkbox"/>
Smooth movement from center of nose to maximum deviation in approximately 2 seconds and back across the subject's face to maximum deviation in the right eye, then back to center. Check the left, then right eye. (Repeat)	<input type="checkbox"/>	<input type="checkbox"/>
Eye held at maximum deviation for a minimum of 4 seconds (no white showing). Check left eye then right eye. (Repeat)	<input type="checkbox"/>	<input type="checkbox"/>
Eye moved slowly (approximately 4 seconds) from center to 45 degree angle. Check left eye then right eye. (Repeat)	<input type="checkbox"/>	<input type="checkbox"/>
Check for Vertical Gaze Nystagmus. (Repeat)	<input type="checkbox"/>	<input type="checkbox"/>

Walk and Turn

	Yes	No
Instructions given from a safe position.	<input type="checkbox"/>	<input type="checkbox"/>
Tells subject to place feet on a line in heel-to-toe manner (left foot behind the right foot) with arms down at their and gives a demonstration.	<input type="checkbox"/>	<input type="checkbox"/>
Tells subject not to begin the test until instructed to do so and asks if the subject understands.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject to take nine heel-to-toe steps on the line and demonstrates.	<input type="checkbox"/>	<input type="checkbox"/>
Explains and demonstrates turning procedure.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject to return on the line taking nine heel-to-toe steps.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject to count steps out loud.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject to look at their feet while walking.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject not to raise their arms from their sides.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject not to stop once they begin.	<input type="checkbox"/>	<input type="checkbox"/>
Asks the subject if all of the instructions are understood.	<input type="checkbox"/>	<input type="checkbox"/>

One-Leg Stand

	Yes	No
Instructions given from a safe position.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject to stand straight, place their feet together, and hold arms at their sides.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject not to begin the test until instructed to do so and asked if they understands.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject to raise one leg, either leg, approximately 6" from the ground keeping the raised foot parallel to the ground, and give a demonstration.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject to keep both legs straight and look at the elevated foot.	<input type="checkbox"/>	<input type="checkbox"/>
Tells the subject to count out loud in the following manner: one thousand one, one thousand two, one thousand three, until told to stop, and gives demonstration.	<input type="checkbox"/>	<input type="checkbox"/>
Checks the actual time the subject holds their leg up. (time for 30 seconds)	<input type="checkbox"/>	<input type="checkbox"/>

Proficiency Requirements Completed *

	Yes	No
Officer was able to recite all of the clues for Horizontal Gaze Nystagmus Test.(6)Clues	<input type="checkbox"/>	<input type="checkbox"/>
Officer was able to recite all of the clues for the Walk and Turn Test.(8)Clues	<input type="checkbox"/>	<input type="checkbox"/>
Officer was able to recite all of the clues for the One-Leg Stand Test.(4)Clues	<input type="checkbox"/>	<input type="checkbox"/>

Date training was observed

<input type="text"/>	<input type="text"/>	<input type="text"/>	
Month	Day	Year	

Instructor Information

Instructor's Name

*

Instructor's Academy ID Number *

Instructor's Agency *

Instructor's Email Address *

Instructor's Phone Number *

<input type="text"/>	-	<input type="text"/>
Area Code		Phone Number

South Carolina Criminal Justice Academy

DUI/SFST Instructor Recertification Form

Please fill the name field exactly how it is in Acadis. Nicknames or any other form will not be accepted.

Instructor's Name *

<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	Middle Name	Last Name

Academy ID Number *

Agency Name *

E-Mail Address

Phone Number

<input type="text"/>	-	<input type="text"/>
Area Code		Phone Number

Necessary Requirements for Recertification

Name of Officer #1 *

Date Proficiency Performed *

Name of Officer #2 *

Date Proficiency Performed *

Please maintain all copies of Proficiencies that you sign off so they may be provided to the S.C. Criminal Justice Academy if requested. If you have instructed a DUI/SFST class and wish to use that for your recertification requirements please list that information above in place of the Officers Name. Any questions should be directed to Michael Brantley @ 803-896-7791 or jmbrantley@sccja.sc.gov

Reserve Training

Application for Approval as SC Reserve Department (must be completed annually) -- WORD Document that can be sent via email

Application for SC Reserve Officer Training Implementation (must be completed before each training program begins) -- WORD Document that can be sent via email

Reserve Attestation and Authorization to Release Form -- WORD Document that can be sent via email

Departmental Training Verification -- WORD Document that can be sent via email

Reserve Firearms, EVO and Local Ordinances/Policies Qualification and Training Verification Form -- WORD Document that can be sent via email

Reserve Officer Training Program PPCT Proficiency Form -- WORD Document that can be sent via email



**South Carolina Criminal Justice Academy
Instructional Standards and Support Section
5400 Broad River Road
Columbia, SC 29212
803-896-7843
803-896-8746 (fax)**

**Application for Approval as SC Reserve Department
2016-2017**

A new Application for Approval as SC Reserve Department form must be completed **annually** (by July 15). Fax completed form to CJA Instructional Standards and Support at 803-896-8746.

If you wish to conduct a South Carolina Reserve Officer Training Program, complete the Application for South Carolina Reserve Officer Training Implementation form and fax to 803-896-8746.

.....
PLEASE PRINT OR TYPE

Date: _____ Department: _____
 Chief/Sheriff (full name): _____ Acadis ID: _____
 Reserve Liaison (include rank): _____ Acadis ID: _____
 Each department using reserve officers must have one full-time class 1 officer as coordinator-supervisor who **must be responsible directly to the Chief/Sheriff.**
 Mailing Address: _____ City: _____ Zip Code: _____
 Telephone #: _____ Fax #: _____
 Chief/Sheriff's E-Mail: _____ Reserve Liaison's E-Mail: _____

Provide valid e-mail addresses for Chief/Sheriff/Agency Head and Reserve Liaison. All correspondence concerning the reserve program will be via e-mail.

of Full Time Class 1 Officers: _____ # of Reserve Officers Currently Appointed: _____

A reserve officer is a **non-paid** volunteer who assists a law enforcement agency in enforcing the laws of South Carolina. Reserve officers **cannot** be paid for road hours or administrative duties. However, S.C. Code 23-28-20(B) states, in part: "The chief, with the approval of the governing body, also shall allow for the compensation of reserve police officers for work done pursuant to Section 23-24-10 [Extra Duty] when compensation for approved public activities would be paid by a party other than the municipality or county. Reserve officers must be paid for approved public activities the same as off-duty police officers. Work performed for compensation must be in excess of the minimum logged service time required by Section 23-29-70 [20 hrs monthly/60 hrs quarterly]..." (Emphasis Added) No other compensation is allowed for under South Carolina state law.

Every reserve officer must be in proximate contact, by radio or another device, with the full-time officer to whom he/she is assigned at all times. Reserve officers cannot supervise or direct activities of class 1 or class 3 law enforcement officers.

Your agency is responsible for maintaining time sheets and training records for all reserve officers. Reserve officers must maintain a logged service time of 20 hrs monthly/60 hrs quarterly. Training hours and commuting time to and from duty **do not** count toward logged service time. Any service performed by a reserve officer for which compensation is received (e.g., providing security at athletic events, parades, or similar events) **must be in excess of the required 20 hrs monthly/60 hrs quarterly** and **cannot** be counted toward the required logged service time.

In-service training shall be held periodically but not less than once a month. Consecutive absences of more than three sessions may be grounds for dismissal. Annual training must include Legal Update, DV Update, Firearms Qualification, and Agency Policy Updates. Training **does not** count toward the logged service time requirement.

A reserve officer who cannot meet the requirements for logged service time and monthly/annual training should be terminated until such time he/she is able to comply with the requirements. A PCS of Separation must be submitted to Certification. If a reserve officer is out over 1 year, he/she will require additional training to return. If out over 3 years he/she must complete entire reserve training program.

Reserve status is not covered by military leave. The Department should separate the reserve officer from reserve status, unless he/she is able to continue doing in-service and logged service time each month. A separation of over one year is considered a break in service.

Should any conflict regarding logged service time or training arise, the SC Criminal Justice Academy reserves the right to review all documents maintained by the department on reserve officers.

Signature of Police Chief/Sheriff/Agency Head (no designee allowed) _____ Date _____

Approved: <input type="checkbox"/>	A new Application for Approval as SC Reserve Department form must be completed every year in July and any time a change is made to information on the form (change in Chief/Sheriff/Agency Head, or Reserve Liaison; reserve officers added/removed - include PCS also).
Denied: <input type="checkbox"/>	

CJA Standards Program Coordinator: _____ Date: _____

Department: _____

Provide **full name** (no nickname) and Academy # for each Reserve officer currently working with your Department. The number of reserve officers cannot exceed the number of class 1 full-time officers of the department. This information will be compared with Academy records. Do not list reserve candidates who are currently attending training and have not passed the examination.

If a reserve officer has resigned or been terminated you must submit a PCS of Separation to the Certification Unit.

Reserve Officer's Full Name (Name on SS Card - no nicknames)		Academy ID #	Reserve Officer's Full Name (Name on SS Card - no nicknames)		Academy ID #
1.	_____	_____	51.	_____	_____
2.	_____	_____	52.	_____	_____
3.	_____	_____	53.	_____	_____
4.	_____	_____	54.	_____	_____
5.	_____	_____	55.	_____	_____
6.	_____	_____	56.	_____	_____
7.	_____	_____	57.	_____	_____
8.	_____	_____	58.	_____	_____
9.	_____	_____	59.	_____	_____
10.	_____	_____	60.	_____	_____
11.	_____	_____	61.	_____	_____
12.	_____	_____	62.	_____	_____
13.	_____	_____	63.	_____	_____
14.	_____	_____	64.	_____	_____
15.	_____	_____	65.	_____	_____
16.	_____	_____	66.	_____	_____
17.	_____	_____	67.	_____	_____
18.	_____	_____	68.	_____	_____
19.	_____	_____	69.	_____	_____
20.	_____	_____	70.	_____	_____
21.	_____	_____	71.	_____	_____
22.	_____	_____	72.	_____	_____
23.	_____	_____	73.	_____	_____
24.	_____	_____	74.	_____	_____
25.	_____	_____	75.	_____	_____
26.	_____	_____	76.	_____	_____
27.	_____	_____	77.	_____	_____
28.	_____	_____	78.	_____	_____
29.	_____	_____	79.	_____	_____
30.	_____	_____	80.	_____	_____
31.	_____	_____	81.	_____	_____
32.	_____	_____	82.	_____	_____
33.	_____	_____	83.	_____	_____
34.	_____	_____	84.	_____	_____
35.	_____	_____	85.	_____	_____
36.	_____	_____	86.	_____	_____
37.	_____	_____	87.	_____	_____
38.	_____	_____	88.	_____	_____
39.	_____	_____	89.	_____	_____
40.	_____	_____	90.	_____	_____
41.	_____	_____	91.	_____	_____
42.	_____	_____	92.	_____	_____
43.	_____	_____	93.	_____	_____
44.	_____	_____	94.	_____	_____
45.	_____	_____	95.	_____	_____
46.	_____	_____	96.	_____	_____
47.	_____	_____	97.	_____	_____
48.	_____	_____	98.	_____	_____
49.	_____	_____	99.	_____	_____
50.	_____	_____	100.	_____	_____

A new Application for Approval as SC Reserve Department form must be completed every year in July and any time a change is made to information on the form (change in Chief/Sheriff/Agency Head, or Reserve Liaison; adding/removing reserve officer - include PCS).



South Carolina Criminal Justice Academy
Instruction Standards and Testing
 5400 Broad River Road
 Columbia, SC 29212
 803-896-7843
 Fax: 803-896-8746

Application for South Carolina Reserve Officer Training Implementation

A new Application for SC Reserve Officer Training Implementation form must be completed **before** each training program. A Reserve Candidate Attestation/Authorization to Release Form (Page 4) must be completed and submitted for every reserve candidate attending the training. The application and attestations can be faxed to the CJA Instructional Standards and Testing Unit at 803-896-8746.

Access to electronic copies of SC Reserve Officer Training Manual and videos will be issued **via e-mail after** the application has been approved.

If you have any questions, please contact the CJA Instruction Standards and Testing Unit at 803-896-7843.

.....
 PLEASE PRINT OR TYPE

Date: _____ Department: _____

Chief/Sheriff/Agency Head: _____ Acadis ID #: _____

Reserve Liaison (include rank): _____ Acadis ID #: _____

This individual must be a full-time class 1 law enforcement officer who is responsible directly to the Chief/Sheriff.

Mailing Address: _____

City: _____ Zip Code: _____

Telephone #: _____ Fax #: _____

Chief/Sheriff/Agency Head's E-mail Address: _____ Reserve Liaison's E-mail Address: _____

Provide valid e-mail addresses for Chief/Sheriff/Agency Head and Reserve Liaison. All correspondence concerning the reserve program will be via e-mail.

of Full Time Class I Officers: _____

of Reserves Currently Appointed: _____

of Reserves Scheduled To Attend Training: _____

Dates of Training: _____

You must indicate the beginning and ending dates for the training. You must notify the CJA Standards Unit if the dates change.

Agency Providing Training	Location of Training Activities		
	Agency/Tech College Name	Reserve Coordinator	Telephone #
<input type="checkbox"/> L.E. Agency Submitting Application	_____	_____	_____
<input type="checkbox"/> SC Technical College	_____	_____	_____
<input type="checkbox"/> Other Host L.E. Agency	_____	_____	_____

Section 23-28-70 (E) of the South Carolina Code of Laws states "Each department utilizing reserves shall have one full-time officer as coordinator-supervisor who must be responsible directly to the chief or sheriff."

Course topics on page 2 must be taught in all SC Reserve Officer Training Programs. Hours indicated on lesson plans for items 22 - 37 must be adhered to. Local Ordinances and Policies will remain at 10 hours and must be taught by a representative of the **employing** agency. **Students must be present for all training.**

All instructors for the SC Reserve Officer Training Program must be approved by CJA. Firearms will be taught by a current class 1 law enforcement officer who is a CJA accredited Firearms Instructor, and defensive tactics will be taught by current class 1 law enforcement officer who is a CJA accredited DT Instructor. Local Ordinances and Policies may be taught by a Chief, Sheriff or Agency Head who is not an accredited instructor. A current class 1 law enforcement officer who is a CJA accredited instructor (or an attorney for the Legals) must be present during the showing of the video portions of the training. **STUDY GUIDES ARE NOT ALLOWED.**

Topics 1 - 21 of the training are available electronically and a current class 1 law enforcement officer who is a CJA accredited instructor **must be present** during the viewing. All other topics must be taught by a current class 1 law enforcement officer CJA accredited instructor from the lesson plans provided. **Instructors cannot deviate from the lesson plans or hours.** The employing agency is responsible for teaching their *Local Ordinances and Policies* for a minimum of 10 hours.

Course		Hrs	Instructor and Department or Attorney (Video provided with Lesson Plans)	Acadis ID # or SC Bar #
1	Arrests	2.5		
2	Civil Liability	4		
3	Civil Process	1		
4	Confessions, Interrogation, Miranda Rule	3.75		
5	Courts, Crimes & Courtroom Procedures	2.5		
6	Ethics & Misconduct in Law Enforcement	2.5		
7	Evidence	3		
8	Exclusionary Rule	2.5		
9	First Amendment Issues	1		
10	Introduction to Criminal Law	3		
11	Investigative Detention	2.5		
12	Legally Defensible Use of Force	1.5		
13	Probable Cause	2.5		
14	Searches I	4		
15	Searches II	3.5		
16	Searches III	4		
17	Specific Crimes - Crimes Against Person	3		
18	Specific Crimes - Crimes Against Property	3.5		
19	Domestic Violence	13		
20	Harassment and Stalking	2		
21	Victimology	2		
			Instructor and Department (Lesson Plans Provided For Instructor)	Acadis ID #
22	Child Abuse	3.5		
23	Juvenile Procedures	3.75		
24	Sexual Assault	2.75		
25	Mental Illness	2.5		
26	Prejudice and Personality (Diversity)	3		
27	Officer Survival On and Off Duty	2		
28	Basic Patrol Operations	5		
29	Strategies of Arrest	2.5		
30	Vulnerable Adults	3.5		
31	SALTS (Safe & Legal Traffic Stops)	2		
32	PPCT Use of Force (DT Instructor)	6		
33	PPCT Tactical Handcuffing (DT Instructor)	8.5		
34	PPCT Weapon Retention (DT Instructor)	3.75		
35	Firearms (Firearms Instructor)	22.75		
36	Emergency Vehicle Operations (Driving Instructor)	2		
			Instructor and Department (Agency's Local Ordinances and Policies)	Acadis ID #
37	Local Ordinances/Policies (must be taught by employing agency)	10		

Courses listed above are required. Items 1-21 are taped. A current class 1 law enforcement officer who has either a Basic Instructor or Specific Skills Instructor certification must be present during the presentation. Items 22-31 must be taught by a current class 1 law enforcement officer who has either a Basic Instructor or Specific Skills Instructor certification. Items 32-34 must be taught by a current class 1 law enforcement officer who has a Defensive Tactics Instructor certification. Item 35 must be taught by a current class 1 law enforcement officer who has Firearms Instructor certification. Item 36 must be taught by a current class 1 law enforcement officer who has a Driving Instructor certification. Item 37 must be taught by a current class 1 law enforcement officer who has either a Basic Instructor or Specific Skills certification or a ranking current class 1 law enforcement officer of the hiring agency (Chief, Sheriff, Captain, Lt. or Sgt.) Students cannot miss any portion of the training.

Note: Any change in instructors must be reported to the CJA Standards Unit immediately.

Before a candidate may attend the SC Reserve Officer Training Program, the following must be on file with the employing department.

1. A Photostat copy of candidate's birth certificate.
2. High School diploma or GED certification.
3. Report of current medical exam, on CJA preplacement & medical history form, with physician attesting medically suitable for law enforcement employment.
4. Fingerprint card showing results of SLED and FBI identification fingerprint check. All charges must show a final disposition with NO felony conviction or disqualifying misdemeanor. The employing department must have conducted a background investigation, including a credit check, and the results must be satisfactory.
5. Candidate must hold a valid/current SC Driver's License with no record for the past five (5) years for suspension as a result of Driving Under the Influence of Alcoholic Beverages or Dangerous Drugs, Driving While Impaired, Reckless Homicide, Involuntary Manslaughter or Leaving the Scene of an Accident.
6. A recent photograph. (within 6 months)

Miscellaneous Information

If you are training candidates from other departments, the candidates' employing agencies must complete an Application for Approval as South Carolina Reserve Department and an Application for South Carolina Reserve Officer Training Implementation form (including attestation for each candidate) before the training begins. The employing agency must teach its own *Local Ordinances and Policies* for a minimum of 10 hours.

Any changes in the training program after an application has been approved must be submitted to the CJA Standards Unit immediately for reapproval. Failure to do so may result in the department's reserve status being withdrawn and/or appointments being delayed and/or denied. The Reserve Liaison will be the contact. Any change in the Reserve Liaison must be submitted to the CJA Standards Unit in writing.

Upon completion of the training program the department hosting the training must provide the completed documentation for each candidate (Departmental Training Verification, Qualification & Training Verification Form and DT form). An examination date cannot be set until the documentation is received and reviewed for accuracy. **Note: Students must be present for all training.**

The CJA Academic Testing Unit will prepare an examination consisting of 100 multiple choice test items for reserve officer testing. The current passing grade for appointment as a reserve officer is 70%. Reserve testing is scheduled on the first and third Wednesday of each month at the SC Criminal Justice Academy. Candidates **MUST** be scheduled in advance or they will not be allowed to take the test. Chiefs, Sheriffs, and Agency Heads will be notified of the candidates' scores in writing within 7 working days. Test scores will not be released via telephone/fax or to candidates.

For a successful candidate, a Personnel Change in Status Hire Form must be completed and forwarded to the CJA Certification Unit within 60 days of the test date. This must be done prior to a reserve officer commencing his/her duties. Upon receipt of the appointment form, the CJA Certification Unit will contact you with authorization to begin the reserve officer ride-along requirement within 15 working days.

In the event a candidate fails the test, one retest will be offered. The employing department must contact the CJA Standards Unit at 803-896-7843 to reschedule the test. **This test must be taken within 60 days from the end of the training.** If a candidate fails the test a second time, he/she must wait one year from the date of the last failure before repeating the required training and being tested. (Note: If a candidate fails twice, he/she is not eligible to attend any Academy mandated training (Basic Law Enforcement, Basic Jail, or Limited Duty), the Reserve program or the Constable program for one year from the date of the retest failure.

CJA ISS Program Coordinator

Date Approved

Signature of Chief/Sheriff/Agency Head
(no designee allowed)

Date

(Rev. 10/2016)

Note: All changes in must be reported to the CJA Standards Unit immediately.



South Carolina Criminal Justice Academy
Instructional Standards and Testing Unit
 5400 Broad River Road
 Columbia, SC 29212

Reserve Candidate Attestation and Authorization to Release Form

Form must be completed for each reserve candidate and submitted with Application for SC Reserve Officer Training Implementation. No reserve candidate may attend the SC Reserve Officer Training Program until this form is on file with the SC Criminal Justice Academy.

Please Print:

Candidate's Full Name: _____
 (Name on SS Card - No Nicknames) Last First M.I.

Street Address (No PO Box): _____

City, State, Zip Code: _____

Employing Department: _____

Driver's License #: _____ Issuing State: _____

You must have a SC Driver's License. An out of state Driver's License is NOT acceptable.

Social Security #: _____

Date Of Birth: _____ Race _____ Sex: _____

Training Department: _____

I hereby attest that the following documentation has been reviewed and will be maintained in the above individual's file. I understand that should any conflict regarding documentation authenticity arise, the SC Criminal Justice Academy reserves the right to review all documents maintained by the department on this individual.

Documents Currently On File At Department:

1. A copy of candidate's birth certificate.
2. High School diploma or GED certification.
3. Report of current medical exam, on CJA preplacement & medical history form, with physician attesting medically suitable for law enforcement employment.
4. Fingerprint card showing results of SLED and FBI identification fingerprint check. All charges must show a final disposition with NO felony conviction or disqualifying misdemeanor. The employing department must have conducted a background investigation, including a credit check, and the results must be satisfactory.
5. Candidate must hold a valid/current SC Driver's License with no record for the past five years for suspension as a result of Driving Under the Influence of Alcoholic Beverages or Dangerous Drugs, Driving While Impaired, Reckless Homicide, Involuntary Manslaughter or Leaving the Scene of an Accident.
6. A recent photograph. (within 6 months)

Date: _____ Signature: _____
 Police Chief, Sheriff, or Authorized Representative

Print Name and Title: _____

Notary Public For South Carolina

Sworn to and subscribed before me this: _____ day of _____, _____
 (Day) (Month) (Year)

Signature of Notary Public: _____

Print Name: _____

My Commission Expires: _____ / _____ / _____
 MM DD YEAR

AUTHORIZATION TO RELEASE INFORMATION, ATTESTION OF NO OTHER COMMISSIONS

I hereby authorize the SC Criminal Justice Academy to release any information in its files pertaining to my certification, recertification, decertification, accreditation, maintenance of accreditation, withdrawal of accreditation or any other item of information related to law enforcement training, but not limited to academic achievement, attendance, physical fitness, personal history, and disciplinary records to any South Carolina law enforcement agency by which I may be employed or to its authorized representative.

I hereby release the SC Criminal Justice Academy, including its Director, Deputy Director, employees and agents, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, or assigns because of compliance with this authorization and request to release information, or any attempt to comply with it.

I hereby certify that I will have no other law enforcement commission once the reserve commission is obtained.

Date: _____ Signature: _____
 Signature of Reserve Candidate

For CJA USE ONLY

Test Date _____ Test Grade _____ Retest Date _____ Retest Grade _____



Sc Reserve Officer Candidate Departmental Training Verification

Candidate's **Full** Name as indicated on SS Card (Print) _____

Social Security Number _____

S.C. Driver's License Number _____

This candidate has **completed** the Reserve Police Officer Training as required by South Carolina law and **qualified** with a firearm.

Candidate's Signature

Date

Chief/Sheriff/Tech College Liaison/Instructor Signature

Date

	Course	Hours	Date Completed	Instructor's Full Name and Department <u>Must be Legible</u>
1	Arrests	2.5		
2	Civil Liability	4		
3	Civil Process	1		
4	Confessions, Interrogation, Miranda Rule	3.75		
5	Courts, Crimes and Courtroom Procedures	2.5		
6	Ethics and Misconduct in Law Enforcement	2.5		
7	Evidence	3		
8	Exclusionary Rule	2.5		
9	First Amendment Issues	1		
10	Introduction to Criminal Law	4.5		
11	Investigative Detention	2.5		
12	Probable Cause	2.5		
13	Legally Defensible Use of Force	1.5		
14	Searches I	4		
15	Searches II	3.5		
16	Searches III	4		
17	Specific Crimes - Crimes Against Person	3		
18	Specific Crimes - Crimes Against Property	3.5		
19	Domestic Violence	13		
20	Harassment and Stalking	2		
21	Victimology	2		
22	Child Abuse	3.5		
23	Juvenile Procedures	3.75		
24	Sexual Assault	2.75		
25	Mental Illness	2.5		
26	Prejudice and Personality (Diversity)	3		
27	Officer Survival On and Off Duty	2		
28	Basic Patrol Operations	5		
29	Strategies of Arrest	2.5		
30	Vulnerable Adults	3.5		
31	SALTS (Safe & Legal Traffic Stops)	2		
32	PPCT Use of Force (DT Instructor)	6		
33	PPCT Tactical Handcuffing (DT Instructor)	8.5		
34	PPCT Weapon Retention (DT Instructor)	3.75		
35	Firearms (Firearms Instructor)	22.75		
36	Emergency Vehicle Operations (Driving Instructor)	2		
37	Local Ordinances and Policies	10		

The courses and instructors listed on this form must match the information submitted on the Application for South Carolina Reserve Officer Training Implementation form. The documentation packet must be received before a test date will be scheduled. The examination may **not** be taken by any reserve candidate until the documentation packet is completed in its entirety.



South Carolina Criminal Justice Academy Instructional Standards and Testing

Reserve Firearms, EVO and Local Ordinances/Policies Qualification and Training Verification Form

Note: This form must be completed for all Reserve candidates. This form must also be completed for any Reserve Officer transferring to another department and for Constables transferring to Reserve.

Verification & Certification of the Firearms Qualification

PLEASE PRINT:

Candidate's Full Name as indicated on SS Card (Print) : _____ Acadis ID # or SS#: _____
Employing Department: _____

The above named candidate was taken to the firearms range for qualification purposes. I, the Firearms Instructor, certify the following tasks were completed and the results to be accurate, and I recommend the candidate be QUALIFIED.

- (A) Candidate was given basic weapon safety, both on duty and off duty.
- (B) Weapons liability, both on duty and off duty, was explained to the candidate.
- (C) Candidate fired the qualification course required by the SC Criminal Justice Academy with the following results:

Course of Fire:

50 Round, 25 Yard Course

Points (250 Max – 188 Min)	Date Qualified
_____	_____

Signature of CJA Accredited Firearms Instructor: _____ Acadis ID # or SS#: _____
 Print CJA Accredited Firearms Instructor's Name: _____
 CJA Accredited Firearms Instructor's Accreditation Expiration Date: _____

Emergency Vehicle Operation Affidavit

I do hereby certify that the above named candidate has been instructed, fully understands and has been given a copy of this department's Emergency Response Driving policy.

Department's Authorized Signature: _____ Date: _____
 Print Name: _____ Acadis ID # or SS#: _____

Local Ordinances and Policies Affidavit

I do hereby certify that the above named candidate has been instructed and fully understands this department's Local Ordinances and Policies.

Department's Authorized Signature: _____ Date: _____
 Print Name: _____ Acadis ID # or SS#: _____



SC Reserve Officer Training Program

PPCT Proficiency Form

Candidate's Full Name as indicated on SS Card:

Candidate's Social Security #:

Employing Department:

Date of Test:

Location of Test:

A. PPCT/Tactical Handcuffing P F

Comments:

B. PPCT/Use of Force P F

Comments:

C. PPCT/Weapon Retention P F

Comments:

By signing below, the instructor is certifying that he/she has tested the candidate in all 3 areas (Tactical Handcuffing, Use of Force, and Weapon Retention).

CJA Accredited DT Instructor's Name (Printed):

CJA Accredited DT Instructor's Signature:

Date:

Original form to be maintained in candidate's file along with detailed information on candidate's actual performance. A copy to be maintained in Department's Training File, and a copy to be sent to the Academy along with the Departmental Training Verification Form.

Out-of-State Transfers

Training Review Request Form -- WORD Document that can be sent via email
Release Authorization Form -- PDF that can be sent via email



**South Carolina Criminal Justice Academy
Certification and Compliance
TRAINING REVIEW REQUEST FORM
Prior Law Enforcement training, Certification & Employment**



Requesting Department _____ Phone # _____ Today's Date _____

Officer's Name _____ Social Security or Academy ID # _____

Check: Previously SC Certified Out of State Military Federal

PRIOR TRAINING HISTORY

1. State: _____

Place of Training: _____

Name of Course: _____

Total # Hours: _____ Firearms # Hours _____ EVOC # Hours _____

Dates Attended/Completion Attached: _____

Copy of Certificate of Completion Attached: Yes No

POST Letter Requested: Yes No

2. State: _____

Place of Training: _____

Name of Course: _____

Total # Hours: _____ Firearms # Hours _____ EVOC # Hours _____

Dates Attended/Completion Attached: _____

Copy of Certificate of Completion Attached: Yes No

POST Letter Requested: Yes No

PRIOR LAW ENFORCEMENT EMPLOYMENT

1. From _____ to _____ Agency: _____

2. From _____ to _____ Agency: _____

3. From _____ to _____ Agency: _____

AUTHORIZED SIGNATURE: _____ **PHONE #:** _____

To be completed by requesting department and mailed or FAXED to Attention: Kim Stevens or Jeff Finch, Certification & Compliance, Criminal Justice Academy, 5400 Broad River Road, Columbia, SC 29212. Phone #: 803 896 4399 or 803 896 7805; FAX #: 803 896 7803 Attach: Copy of Certificate of Completion; Curriculum/Syllabus showing hours and topics of training. **POST letter MUST be received and you must be notified that Training Review is COMPLETE PRIOR to registration.** Below this Line - For CJA USE ONLY

Law Enforcement Training Required for SC Certification: _____

Certification & Compliance Manager: _____ Date: _____

Training Operations Manager: _____ Date: _____

Standards Manager: _____ Date: _____

Special Operations Manager: _____ Date: _____

SCCJA Deputy Director: _____ Date: _____

SCCJA Director Approval: _____ Date: _____

Revised 5/7/2015



SOUTH CAROLINA CRIMINAL JUSTICE ACADEMY
 5400 Broad River Road
 Columbia, South Carolina 29212-3540



AUTHORIZATION TO RELEASE INFORMATION

I, the undersigned Officer, hereby authorize the _____
 _____ to release any information in its files pertaining to my certification, recertification, decertification, accreditation, maintenance of accreditation, withdrawal of accreditation or any other item of information related to law enforcement training, including but not limited to academic achievement, attendance, physical fitness, personal history and disciplinary records to the South Carolina Criminal Justice Academy or to its authorized representatives.

I hereby release the _____ from any and all liability for damages of whatever kind, which may at any time result to me, my heirs or assigns because of compliance with this Authorization to Release Information, or any attempt to comply with it.

Dated: _____

Signed in the Presence of:

 Witness' Signature

 Officer's Signature

 Print Full Name

 Social Security Number

K9 Certification

K9 Certification Form – Electronic Form

South Carolina Patrol K9 Certification Form

Officer Name

<input type="text"/>	<input type="text"/>
First Name	Last Name

Officer's email Address

Officer's Employing Agency Name

Date of Certification by Certifying Agency

<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	<input type="button" value=""/>
Month		Day		Year	

K9 Name

K9 Age

Please choose the Certifying Agency from the drop down list below, then upload a copy of the current certification issued by that certifying agency.

If you do not see your certifying agency on this list, please contact Jennifer Tatum, Instructional Standards and Support Unit Manager at JTatum@sccja.sc.gov or Jim Crosland, Basic Training Coordinator at JCrosland@sccja.sc.gov

Certifying Agency

Upload Copy of Certification

No file chosen

Arson Investigators

Guidelines for Arson Investigator Certification – PDF that can be sent via email

Guidelines for Arson Investigator Certification & Training

I. Law Enforcement Selection

Select members of the Fire Department will receive additional training and certification as a Class I or a Class III (Limited Duty) law enforcement officer. The following shall outline the general selection and process:

1. The Fire Department will identify the appropriate staff and number of personnel needed to support the operation and will consult with the Fire Chief. The Fire Chief will forward the names and resumes of the selected members to the Police Chief/Sheriff for consideration as Class I or Class III officers. All such members must be full-time, paid employees of the State of South Carolina or any of its political subdivisions and must be regularly on the payroll.
2. All staff members submitted for consideration for Class I or Class III law enforcement certification must have successfully completed an eighty (80) hour basic fire investigation course.
3. Members selected for the Class I or Class III program will be subject to the background investigation necessary for that certification level by the Police Department.
4. Upon confirmation that the background investigation necessary for that certification level has been successfully passed, all documentation required by the SC Criminal Justice Academy must be completed and prepared for submission. For Class I Officers, that documentation includes: Application for Basic Law Enforcement Training Class, Medical History Form, Document Attestation Form (various elements in the employees file), Attestation of Criminal History Check. For Class III (Limited Duty) Officers, that documentation includes: Application for the Limited Duty Basic Class, Medical History Form, Document Attestation Form (various elements in the employees file), Attestation of Criminal History Check, Two completed fingerprint cards, Firearm Qualifications Form, and Emergency Vehicle Operation Policy Form.
5. Selected employee(s) will be scheduled for the appropriate course (12 week Basic Law for class 1) and, for Class III Officers (66 hours Limited Duty Officer Training), the needed preparation for the Firearm Qualification will be completed in advance of the class and maintained by the commissioning agency.
6. The Fire Department must pay the South Carolina Criminal Justice Academy the cost of providing the certification training requested. This payment must be made prior to the selected employee(s) attending training at the CJA.
 - a. Should the selected employee(s) fail to successfully complete their training, they may be admitted one (1) additional time (recycled) to try and successfully complete training. No additional fee shall be required from the Fire Department unless there is increased cost to the CJA for this recycle.
 - b. Should the selected employee(s) fail a second time to successfully complete their training, they may not be admitted for any additional training at the CJA until a period of one (1) year has passed from the date of the second failure. Should the selected employee(s) return for training at the CJA after one (1) year has passed from the date of their second failure, the entire process of training and

certification with the CJA will begin again, as if the selected employee(s) has never attended any training at the CJA, including, but not limited to, Fire Department paying the CJA for the cost of the certification training requested.

- c. In the case of a second failure, no portion of the fees originally paid to the CJA will be refunded to the Fire Department.
- 7. Upon successful completion of Class I or Class III law enforcement training, the selected employee shall be issued their law enforcement commission by the Chief of Police Department.
- 8. For Class III fire and/or arson investigators, all law enforcement duties shall be limited.

II. Continuing Education Training

- 1. Members of the Fire Department who become certified as Class I or Class III law enforcement officers shall meet all the continuing education requirements for their certification as outlined by the CJA.
- 2. The Police Department shall be responsible for providing all required continuing education training, that is not available directly from CJA, for the fire and/or arson investigators.
- 3. The Police Department shall be responsible for filing all required documents with CJA regarding the fire and/or arson investigator's certification. For example, PCS Reports, MRN Reports, etc...
- 4. Fire and/or arson investigators are encouraged to identify additional training and education that will further benefit their specific investigative skills and knowledge.
- 5. If a fire and/or arson investigator attends advanced training at CJA, the Fire Department must pay the CJA the cost of providing the advanced training requested. This payment must be made prior to the selected employee(s) attending the advanced training at the CJA. In the case of a failure to successfully complete the advanced training, no portion of the fees paid to the CJA will be refunded to the Fire Department.

Chief
Police Department

Date

Chief
Fire Department

Date

Appendix

Accommodations Request for Applicants with Disabilities

Accommodations Request for Applicants with Food Allergies

PCS Instructions

MRN Instructions

Accommodations Request Involving Written Examinations for Applicants with Disabilities

Reserve Program Administrative Guide

POST Letter

Training Review Instructions



Accommodations Request For Applicants With Disabilities

**South Carolina Criminal Justice Academy
Registration Unit
5400 Broad River Road
Columbia, SC 29212-3540
(803) 896-8360 (fax)**

INTRODUCTION

The South Carolina Criminal Justice Academy (Academy) provides reasonable accommodations in accordance with the Amended Americans with Disabilities Act (AADA) for individuals with documented disabilities who demonstrate a need for accommodation, when such accommodation can be provided without compromising the Academy's training or certification standards.

The following information is provided for applicants, qualified disability evaluators, and others who may be involved in the process of documenting a request for examination accommodations so the appropriate documentation can be assembled to support the request.

The AADA and accompanying regulations define a person with a disability as someone with a physical or mental impairment that substantially limits one or more major life activities or an individual with a record of a substantially limiting impairment (functional limitation). **Functional limitation refers to the manifestations of a disability that impedes an individual's ability to function.** The purpose of documentation is to validate that the individual is covered under the AADA as a disabled individual, the disability is such that it necessitates an accommodation, and that the requested accommodation can be made without compromising the Academy training or certification standards.

An applicant's requested accommodations must be related to the identified functional limitation so that the area of impairment is alleviated by the requested accommodation. It is essential that the documentation submitted provide a clear explanation of how or why a specific impairment results in the identified functional limitation(s) and how the requested accommodation will alleviate the identified functional limitation(s).

HOW TO REQUEST EXAMINATION ACCOMMODATIONS

Prior to attendance at any training an applicant must notify the Academy's Registration Unit that he/she has a disability and is requesting accommodations. Applications for accommodations can be obtained on the Academy website – www.sccja.sc.gov – or by contacting the Academy – **Registration Unit at 803-896-9912.**

1. Submit a completed *Application for Accommodations*, Part I and Part II. Be sure to sign the application where indicated.
2. Attach documentation certifying the disability from a qualified licensed professional appropriate for evaluating the disability.
3. The completed *Application for Accommodations* and appropriate documentation **MUST** be mailed to the:

**South Carolina Criminal Justice Academy
Registration Unit
5400 Broad River Road
Columbia, SC 29212 – 3540**

To protect your confidentiality, always send accommodation information separately to the above address. **DO NOT** include these materials with any other correspondence.

4. **The completed application and accompanying documentation MUST be received by the Registration Unit at least 30 calendar days prior to the start of training program. Failure to submit the completed application and accompanying documentation at least 30 calendar days prior to the start of the training program may result in an individual's inability to attend the scheduled training program. If there is a need for further verification of the disability or the need for the requested accommodations, it is possible that the decision whether to provide the requested accommodations will delay participation in the scheduled training program. Any documentation submitted to the Academy related to a request for accommodations may be referred to disability experts (medical and legal) for a fair and impartial professional review of the request.**

COMPLETING AN ACCOMMODATIONS REQUEST FOR LEARNING DISABILITIES

The following additional guidelines are provided to assist applicants in documenting a need for accommodation based on functional limitation caused by a learning disability.

To support a request for accommodations due to a functional limitation caused by a learning disability, please submit the following information/documentation:

1. A completed *Application for Accommodations*.
2. A detailed, comprehensive written report prepared by an evaluator qualified to make such a diagnosis describing the learning disability in terms of how the learning disability impacts a specific major life activity, resulting in the need for the requested accommodation(s).
 - a. Relevant Assessment Batteries:

A neuropsychological or psycho-educational assessment may be necessary in order to determine the individual's pattern, strengths, and/or weaknesses in order to determine whether there are patterns indicative of any learning disorders.
 - b. Specific Diagnosis:
 - (1) The report must include a specific diagnosis of the learning disability based on diagnostic criteria;
 - (2) Individuals who report problems with organization, memory and concentration only on a situational basis do not fit the prescribed diagnostic criteria for learning disability;
 - (3) Given that many individuals benefit from prescribed medications and therapies, a positive response to medication by itself is not supportive of a diagnosis, nor does the use of medication in and of itself either support or negate the need for accommodation(s).
 - c. Clinical Summary

A well-written diagnostic summary based on a comprehensive evaluative process is a necessary component of the assessment. The clinical summary should include:

- (1) Demonstration of the evaluator's having ruled out alternative explanations for the symptoms of the diagnosed learning disability as a result of psychological or medical disorders or non-cognitive factors;
- (2) Indication of the substantial limitation to learning presented by the diagnosed learning disability and the degree to which it impacts the individual in the context for which accommodation(s) is/are being requested;
- (3) Indication as to why specific accommodation(s) is/are needed and how the effects of diagnosed learning disability symptoms are lessened by the accommodation(s);
- (4) Specific recommendations for accommodation(s);
- (5) A detailed explanation must be provided as to why each accommodation is recommended and should be correlated with specific identified functional limitation;
- (6) Prior documentation of a diagnosed learning disability may be useful in determining appropriate services and/or accommodations in the present. Therefore, please include any record of prior accommodation(s), including information about specific conditions under which the accommodation(s) was/were used;
- (7) **If no prior accommodation has been provided, include a detailed explanation as to why no accommodation was provided in the past and why accommodation is needed at this time.**

CHANGE IN DISABILITY OR ACCOMMODATIONS REQUESTED

If there are any changes in the nature or extent of your disability or if the accommodations will differ from previously provided accommodations, you must submit an updated application as soon as possible prior to the start of training and provide detailed documentation explaining the change.

ALL MATERIALS AND ALL INQUIRIES MUST BE SUBMITTED TO THE FOLLOWING ADDRESS

**South Carolina Criminal Justice Academy
Registration Unit
5400 Broad River Road
Columbia, SC 29212**



Accommodations Request For Applicants With Food Allergies

**South Carolina Criminal Justice Academy
Registration Unit
5400 Broad River Road
Columbia, SC 29212-3540
(803) 896-8360 (fax)**

INTRODUCTION

The South Carolina Criminal Justice Academy (Academy) provides reasonable accommodations for individuals with documented food allergies.

The following information is provided for applicants, qualified evaluators, and others who may be involved in the process of documenting a request for accommodations for food allergies so the appropriate documentation can be assembled to support the request.

The purpose of documentation is to validate the individual has a food allergy, that the food allergy is such that it necessitates an accommodation, and that the requested accommodation can be made without compromising the Academy training or certification standards.

An applicant's requested food accommodations must be related to the food allergy. It is essential that the documentation submitted provide a clear food allergy explanation and how the requested food accommodation will alleviate the food allergy.

HOW TO REQUEST EXAMINATION ACCOMMODATIONS

Prior to attendance at any training an applicant must notify the Academy's Registration Unit that he/she has a food allergy and is requesting accommodations. Applications for food accommodations can be obtained on the Academy website – www.sccja.sc.gov – or by contacting the Academy – **Registration Unit at 803-896-9912**.

1. Submit a completed *Application for Food Accommodations*, Part I and Part II. Be sure to sign the application where indicated.
2. Attach documentation certifying the food allergy from a qualified licensed professional appropriate for evaluating the food allergy.
3. The completed *Application for Food Accommodations* and appropriate documentation **MUST** be mailed to the:

South Carolina Criminal Justice Academy
Registration Unit
5400 Broad River Road
Columbia, SC 29212 – 3540

To protect your confidentiality, always send food accommodation information separately to the above address. **DO NOT** include these materials with any other correspondence.

4. The completed application and accompanying documentation **MUST** be received by the Registration Unit at least 30 calendar days prior to the start of training program. Failure to submit the completed application and accompanying documentation at least 30 calendar days prior to the start of the training program may result in an individual's inability to attend the scheduled training program. If there is a need for further verification of the food allergy or the need for the requested accommodations, it is possible that the decision whether to provide the requested accommodations will delay participation in the scheduled training program. Any documentation submitted to the Academy related to a request for food accommodations

may be referred to experts (medical and legal) for a fair and impartial professional review of the request.

CHANGE IN FOOD ACCOMMODATIONS REQUESTED

If there are any changes in the nature or extent of your food allergies or if the accommodations will differ from previously provided food accommodations, you must submit an updated application as soon as possible prior to the start of training and provide detailed documentation explaining the change.

**ALL MATERIALS AND ALL INQUIRIES MUST BE SUBMITTED TO THE
FOLLOWING ADDRESS**

**South Carolina Criminal Justice Academy
Registration Unit
5400 Broad River Road
Columbia, SC 29212**



PERSONNEL CHANGE IN STATUS REPORT OF SEPARATION FORMS

There are two PCS forms used when an officer and agency separate:

- (1) Notification of Administrative/Routine Separation
- (2) Notification of Separation Due to Misconduct

Administrative/Routine Separations:

This form is to be used for all separations that do **NOT** involve misconduct as defined by S.C. Reg. 37-025. Examples of administrative / routine separations include, but are not limited to:

Resignation, retired, deceased, new Sheriff, accepted employment with another law enforcement agency, Medical or Military Leave, failed to complete basic training, failed to complete in-service training, transfer from one law enforcement classification to another law enforcement classification (i.e. LE1 to LECO), or termination for violation of Agency policy **NOT** involving misconduct as defined by S.C. Regulation 38-004 (i.e., substandard performance, excessive absenteeism, failure to follow orders, etc.)

Also, there is a block titled "Other" which can be used to indicate the nature of the separation if one of the above examples is not accurate. Please remember, that the "Other" block should only be used for separations that do **NOT** involve misconduct as defined by S.C. Reg. 37-025.

All Administrative/Routine Separations **must** be accompanied by a Mandatory Retraining Notification (MRN form) indicating in-service training received while the officer was employed with your agency.

All Administrative/Routine Separations must be received by SCCJA within **15 days** of the separation. See S.C. Reg. 37-022.

Separations Due to Misconduct:

This form is to be used for any separation involving misconduct as defined in S.C. Reg. 37-025. **All Separations Due to Misconduct must fall within the definition of misconduct under S.C. Reg. 37-025.** Examples of Separations Due to Misconduct include, but are not limited to:

Termination or Resignation **INVOLVING MISCONDUCT** as defined in S.C. Reg. 37-025.

S.C. Reg. 37-025 defines misconduct as [with examples in brackets]:

- 1. Conviction, plea of guilty, plea of no contest or admission of guilt (regardless of withheld adjudication) to a felony, a crime punishable by a sentence of more than one year (regardless

of the sentence actually imposed, if any), or a crime of moral turpitude in this or any other jurisdiction [For example, but not limited to: conviction Fraudulent Check, admission of guilt to shoplifting even if not convicted of shoplifting, etc...]

2. Unlawful use of a controlled substance [For example, but not limited to: Observation of unlawful use of a controlled substance and/or testing positive for use of a controlled substance, etc...];

3. The repeated use of excessive force in dealing with the public and/or prisoners;

4. Dangerous and/or unsafe practices involving firearms, weapons, and/or vehicles which indicate either a willful or wanton disregard for the safety of persons or property [For example, but not limited to: failure to properly secure firearms/weapons, DUI conviction, etc...];

5. Physical or psychological abuses of members of the public and/or prisoners;

6. Misrepresentation of employment-related information [For example, but not limited to: Lying or misrepresenting current or former law enforcement position or reason for separation, etc...];

7. Dishonesty with respect to his/her employer [For example, but not limited to: Lying during an internal affairs investigation, etc...];

8. Untruthfulness with respect to his/her employer [For example, but not limited to: Lying during an internal affairs investigation, etc...].

All separations reported on the Notification of Separation Due to Misconduct form must include both pages of the Notification of Separation Due to Misconduct form. One of the eight categories listed above as misconduct under S.C. Reg. 37-025 **must** be selected on the Notification of Separation Due to Misconduct form. If the behavior does not fall into one of the eight categories listed above as misconduct under S.C. Reg. 37-025, then it is likely the behavior is not misconduct as defined by S.C. Reg. 37-025.

The Notification of Separation Due to Misconduct form **REQUIRES detailed** information describing the misconduct behavior to be provided in a narrative format. Additional pages may be attached to the Notification of Separation Due to Misconduct form if needed. The Notification of Separation Due to Misconduct form also **REQUIRES** the reporting agency to indicate if criminal charges have been filed against the officer and, if charges have been filed, to list those charges.

The Notification of Separation Due to Misconduct form also **REQUIRES** the reporting agency to attach  investigation report(s), statements, test results, audio/video records, and/or other documentation related to the misconduct. **If the Notification of Separation Due to Misconduct form is received by SCCJA, but does not have the supporting documentation attached the form and report may not be accepted by SCCJA.**

All Notification of Separation Due to Misconduct forms **must** be signed by the **Agency Head**.

All Notification of Separation Due to Misconduct forms must be received by SCCJA within **15 days** of the discovery of any event of misconduct which is determined to be **"Founded"** by the reporting agency. See S.C. Reg. 37-023. Please note, however, that if your agency has an internal grievance procedure, you may complete your grievance procedure prior to filing the Notification of Separation Due to Misconduct form. If a grievance is proceeding and you are not going to file the Notification of Separation Due to Misconduct form until the grievance is completed, please submit an Administrative/Routine PCS of Separation, check the other block, and state "Grievance Pending." If an allegation of misconduct is **NOT** "Founded" by the reporting agency, it does **NOT** have to be reported to SCCJA.

INSTRUCTIONS FOR COMPLETING MRN

(Mandatory Retraining Notification)

Section I: ATTESTATION

- **Agency Name**
- **Reporting Period** -- Year you are reporting training for.
- All training records for Law Enforcement Recertification is subject to verification by the SC Criminal Justice Academy.
- Must be signed by agency representative, dated and properly notarized.

Section II - ROSTER OF OFFICER(S) RENEWING CERTIFICATION

Certification Renews Every (3) Years

- **Class 1 LEO - Officer that has completed 12 Week Basic Certification Requirements**
 - Legal Update each year
 - CDV Update each year
 - In- Service Hours

Legal(s), CDV(s) and In-Service Hours should total 40 Hours for the three year renewal.

- **Class 1 LECO - Officer that has completed 12 Week Basic & Basic Jail Certification Requirements**
 - Legal Update each year
 - CDV Update each year
 - 120 In-Service Hours for the three year renewal.

Legal(s), CDV(s) and In-Service -120 Hours for the three year renewal.

Section II -cont'd

- **Class 2 LCO - Officer that has completed 3 Week Basic Jail Certification Requirements**
 - 40 In-Service Hours each year
 - In-Service hours should total at least 120 Hours for the three year renewal.

 - **Class 3 SLE - Officer that has completed 2 Week Limited Duty Basic**
(Example of Class 3 duties: Litter/Animal Control, Court Security)
Certification Requirements
 - (1) Legal each year of the three year renewal.
-

➤ **REPORTING A CDV OR LEGAL**

- **Date:** List month, day and year the Legal or CDV was TAKEN.
- **Year Viewed:**
Record the "Specific Year" of the Legal or CDV Update you watched under Year Viewed, for Example: CDV Update for 2016, 2017, 2018), Legal Update for 2016/2017, 2017/2018 and 2018/2019.

➤ **REPORTING IN-SERVICE AND EVO HOURS**

Enter total number of In-Service Hours for Class 1 LEO; Class 1 LECO; Class 2 LCO under In-Service/EVO Column.

➤ **REPORTING SEPARATE CERTIFICATION HOURS**

This section should only be completed when an Officer is deficient in their in-service hours for Certification Renewal.

Separate Certification Hours - Certifications that are earned at CJA and grant you a certification other than the Basic Training. (Not needed if you have enough In-Service Hours for Renewal)

Examples of Separate Certifications: Firearms, Basic Inst., Driving, Radar.

ReportingEnter total number of hours you do not need to break out each Certification.

Forms located at sccja.sc.gov

Revised 02/15/2017



Accommodations Request Involving Written Examinations For Applicants With Disabilities

**South Carolina Criminal Justice Academy
Instructional Standards & Support Section
Academic Testing Unit
5400 Broad River Road
Columbia, SC 29212-3540
(803) 896-7956
(803) 896-8746 (fax)**

INTRODUCTION

The South Carolina Criminal Justice Academy (Academy) provides reasonable accommodations in accordance with the Amended Americans with Disabilities Act (AADA) for individuals with documented disabilities who demonstrate a need for accommodation, when such accommodation can be provided without compromising the Academy's training or certification standards.

The following information is provided for applicants, qualified disability evaluators, and others who may be involved in the process of documenting a request for examination accommodations so the appropriate documentation can be assembled to support the request.

The AADA and accompanying regulations define a person with a disability as someone with a physical or mental impairment that substantially limits one or more major life activities or an individual with a record of a substantially limiting impairment (functional limitation). **Functional limitation refers to the manifestations of a disability that impedes an individual's ability to function.** The purpose of documentation is to validate that the individual is covered under the ADA as a disabled individual, that the disability is such that it necessitates an accommodation, and that the requested accommodation can be made without compromising the Academy training or certification standards.

An applicant's requested accommodations must be related to the identified functional limitation so that the area of impairment is alleviated by the requested accommodation, typically an auxiliary aid or an adjustment to the examination procedure. It is essential that the documentation submitted provide a clear explanation of how or why a specific impairment results in the identified functional limitation(s) and how the requested accommodation will alleviate the identified functional limitation(s).

While presumably the use of accommodations in the examination activity will enable the individual to better demonstrate his/her knowledge mastery, accommodations are not a guarantee of improved performance, examination completion, or a passing score.

EXAMINATION ACCOMMODATIONS

Examination accommodations may include, but are not limited to, the following:

- * Assistance in completing answer sheet(s);
- * Extended examination time;
- * Large print examination;
- * Private testing area.

HOW TO REQUEST EXAMINATION ACCOMMODATIONS

Prior to any testing an applicant must notify the Academy's Academic Testing Unit that he/she has a disability and is requesting examination accommodations. Applications for accommodations can be obtained on the Academy website – www.sccja.sc.gov – or by contacting the Academy - Academic Testing Unit at 803-896-7956.

1. Submit a completed *Application for Written Test Accommodations*, Part I and Part II. Be sure to sign the application where indicated.
2. Attach documentation certifying the disability from a qualified licensed professional appropriate for evaluating the disability.
3. The completed *Application for Written Test Accommodations* and appropriate documentation **MUST** be mailed to the:

**South Carolina Criminal Justice Academy
Instructional Standards & Support Section
Attention: Manager, Academic Testing Unit
5400 Broad River Road
Columbia, SC 29212 – 3540**

To protect your confidentiality, always send examination accommodation information separately to the above address. **DO NOT** include these materials with any other correspondence.

4. The completed application and accompanying documentation **MUST** be received by the Academic Testing Unit at least 30 calendar days prior to the start of training program. Failure to submit the completed application and accompanying documentation at least 30 calendar days prior to the start of the training program may result in an individual's inability to attend the scheduled training program. If there is a need for further verification of the disability or the need for the requested accommodations, it is possible that the decision whether to provide the requested accommodations will delay participation in the scheduled training program. Any documentation submitted to the Academy related to a request for written test accommodations may be referred to disability experts (medical and legal) for a fair and impartial professional review of the request.

COMPLETING AN ACCOMMODATIONS REQUEST FOR LEARNING DISABILITIES

The following additional guidelines are provided to assist applicants in documenting a need for accommodation based on functional limitation caused by a learning disability.

To support a request for examination accommodations due to a functional limitation caused by a learning disability, please submit the following information/documentation:

1. A completed *Application for Written Test Accommodations*.
2. A detailed, comprehensive written report prepared by an evaluator qualified to make such a diagnosis describing the learning disability in terms of how the learning disability impacts a specific major life activity, resulting in the need for the requested accommodation(s).

a. Relevant Assessment Batteries:

A neuropsychological or psycho-educational assessment may be necessary in order to determine the individual's pattern, strengths, and/or weaknesses in order to determine whether there are patterns indicative of any learning disorders.

b. Specific Diagnosis:

- (1) The report must include a specific diagnosis of the learning disability based on diagnostic criteria;
- (2) Individuals who report problems with organization, test anxiety, memory and concentration only on a situational basis do not fit the prescribed diagnostic criteria for learning disability;
- (3) Given that many individuals benefit from prescribed medications and therapies, a positive response to medication by itself is not supportive of a diagnosis, nor does the use of medication in and of itself either support or negate the need for accommodation(s).

c. Clinical Summary

A well-written diagnostic summary based on a comprehensive evaluative process is a necessary component of the assessment. The clinical summary should include:

- (1) Demonstration of the evaluator's having ruled out alternative explanations for the symptoms of the diagnosed learning disability as a result of psychological or medical disorders or non-cognitive factors;
- (2) Indication of the substantial limitation to learning presented by the diagnosed learning disability and the degree to which it impacts the individual in the context for which accommodation(s) is/are being requested (e.g., impact on an examination situation);
- (3) Indication as to why specific accommodation(s) is/are needed and how the effects of diagnosed learning disability symptoms are lessened by the accommodation(s);
- (4) Specific recommendations for accommodation(s);
- (5) A detailed explanation must be provided as to why each accommodation is recommended and should be correlated with specific identified functional limitation;
- (6) Prior documentation of a diagnosed learning disability may be useful in determining appropriate services and/or accommodations in the present. Therefore, please include any record of prior accommodation(s), including information about specific conditions under which the accommodation(s)

was/were used (e.g., standardized testing, final exams, subject exams, etc.);

- (7) **If no prior accommodation has been provided, include a detailed explanation as to why no accommodation was provided in the past and why accommodation is needed at this time.**

CHANGE IN DISABILITY OR ACCOMMODATIONS REQUESTED

If there are any changes in the nature or extent of your disability or if the accommodations will differ from previously provided accommodations, you must submit an updated application as soon as possible prior to the start of training and provide detailed documentation explaining the change.

ALL MATERIALS AND ALL INQUIRIES MUST BE SUBMITTED TO THE FOLLOWING ADDRESS

**South Carolina Criminal Justice Academy
Instructional Standards & Support Section
Attention: Manager, Academic Testing Unit
5400 Broad River Road
Columbia, SC 29212 – 3540**

SOUTH CAROLINA RESERVE OFFICER TRAINING PROGRAM

Administrative Guide



SC Criminal Justice Academy Instructional Standards and Testing

**2016 Edition
Rev. 10/2016**

South Carolina Reserve Officer Training Program

Authority

SC Reserve Officer Law – Chapter 28, Title 23, Code of Laws of SC.

The South Carolina Reserve Officer

A reserve officer is a non-paid volunteer who assists a law enforcement agency in enforcing the laws of South Carolina. The reserve officer is appointed by and serves at the pleasure of the agency head.

A reserve officer candidate must successfully complete the SC Reserve Officer Training Program to include an end of course written examination prepared by the South Carolina Criminal Justice Academy.

Every reserve officer must be in proximate contact, by radio or another device, with the full-time officer to whom he/she is assigned at all times. **Reserve officers cannot supervise or direct activities of Class 1 or Class 3 law enforcement officers or other reserve officers.**

Following are detailed descriptions of all requirements/responsibilities of host departments and reserve officer candidates. Please read carefully. For questions contact:

Kathy Danielsen, Program Coordinator
Instructional Standards and Testing
803-896-7843
KMDanielsen@sccja.sc.gov

or

Theresa Clark, Administrative Coordinator
Certification Unit
803-896-7804
THClark@sccja.sc.gov

Reserve Topics

How to Become a South Carolina Reserve Department	2
How to Conduct a South Carolina Reserve Officer Candidate Training Program	3
South Carolina Reserve Officer Training Program Course Titles	4
South Carolina Reserve Officer Testing Process	5
Documentation Required Before Reserve Officers Can Begin Ride-Along Requirement.....	5
Miscellaneous Facts	6
Reserve Officers with a Break In Service.....	8
Transfer of Reserve Officer to Another Department	9
Transfer of Constable to a Reserve Officer	10
When a Personnel Change in Status Report Form is Necessary.....	11
Maintaining Reserve Officer's Training File	12
Constables	13

How to Become a South Carolina Reserve Department

To have a South Carolina Reserve Officer Program, the department must complete and return the Application for Approval as South Carolina Reserve Department form. Once a department has been approved as a South Carolina Reserve Department, that department must submit a new application by **July 15 each year** and anytime there is a change to any information on the application; i.e., new chief/sheriff/agency head, new reserve liaison, addition/resignation/termination of reserve officer. This form is to be submitted if the department has active reserve officers.

It is the department's responsibility to submit the required paperwork annually in July. The South Carolina Criminal Justice Academy (Academy) will not send out reminders. Failure to complete the paperwork annually will result in a department's reserve status being withdrawn. An updated application is required any time a change is made to any area of the application (agency head, reserve liaison, reserve officers added/removed).

Each department using reserve officers must have one full-time class 1 officer as coordinator-supervisor who must be responsible directly to the Chief/Sheriff. This reserve liaison is responsible for the coordination of training classes and scheduling of the reserve test.

Should any conflict regarding logged service time or training arise, the SC Criminal Justice Academy reserves the right to review all documents maintained by the department on the reserve officers.

All departments need to submit an email address for the Chief/Sheriff/Agency Head and reserve liaison as correspondence concerning the reserve program will be handled via email.

Completed and signed forms can be submitted via:

Mail: Kathy Danielsen
SC Criminal Justice Academy
Instructional Standards and Testing
5400 Broad River Road
Columbia, SC 29212

Or

Fax: 803-896-8746

Or

Email: kmdanielsen@sccja.sc.gov

How to Conduct a South Carolina Reserve Officer Candidate Training Program

Approved reserve departments may apply to conduct a South Carolina Reserve Officer Training Program. In order to host a South Carolina Reserve Officer Training Program, the department must complete and return the Application for South Carolina Reserve Officer Training Implementation form **before beginning each training program**, along with a Reserve Candidate Attestation and Authorization to Release Form for each candidate attending the training. (Candidates must be 21 years of age before attending training.) The forms can be faxed to 803-896-8746. Allow 14 working days for processing. The form must indicate the beginning and ending dates for the training.

If candidates from other departments are attending the training, the candidates' employing agencies must complete an Application for Approval as South Carolina Reserve Department and an Application for South Carolina Reserve Officer Training Implementation form **before the training program begins**, along with a Reserve Candidate Attestation and Authorization to Release Form for each candidate attending the training. Pages 1, 3 and 4 must be completed entirely; however, on page 2 of the Application for South Carolina Reserve Officer Training Implementation form only complete line 36 indicating who from the employing department will be providing the training for the Local Ordinances and Policies. This must be done **BEFORE** the training program begins. It is up to the department offering/sponsoring the training to ensure that all paperwork is on file with the Standards Unit before allowing other departments to send candidates for training. Chiefs/Sheriffs/Agency Heads or reserve liaisons may contact the Standards Unit at 803-896-7843 to verify.

Any changes (i.e., changes in instructors, training dates, candidates) in the training program after an application has been approved must be submitted to the Standards Unit immediately for reapproval. Failure to do so may result in delayed testing of candidates or candidates not being allowed to test.

The reserve liaison will be the contact for questions and scheduling of the test. Any change in the reserve liaison must be submitted to the Standards Unit.

Once the above steps have been completed and the applications approved, the Academy will provide access to the South Carolina Reserve Officer Training Manual and the recorded Legals and DV coursework along with the recordings used with Vulnerable Adults and SALTS.

Note: Before a candidate may attend the SC Reserve Officer Training Program, the following must be on file with the employing department. By signing the Reserve Candidate Attestation and Authorization to Release Form you are indicating that these items are **currently on file with the employing department**.

1. A Photostat copy of candidate's birth certificate
2. High School diploma or GED certification.
3. Report of current medical exam, on CJA preplacement & medical history form, with physician attesting medically suitable for law enforcement employment.
4. Fingerprint card showing results of SLED and FBI identification fingerprint check. All charges must show a final disposition with NO felony conviction or disqualifying misdemeanor. The employing department must have conducted a background investigation, including a credit check, and the results must be satisfactory.
5. Candidate must hold a valid/current SC Driver's License with no record for the past five years for suspension as a result of Driving Under the Influence of Alcoholic Beverages or Dangerous Drugs, Driving While Impaired, Reckless Homicide, Involuntary Manslaughter or Leaving the Scene of an Accident. There is no exception for military personnel. All reserve candidates must have a SC Driver's License.
6. A recent photograph. (within 6 months)

South Carolina Reserve Officer Training Program Course Titles

Program coursework consists of instructional units from law to firearms. Lesson plans are developed and approved by the Academy. All lesson plans will be provided by the Academy with the exception of Local Ordinances and Policies. Lesson plans must be taught as structured; modification of performance objectives, instructional content, time required, and support training material is prohibited.

In addition to the manual, Legals and DV portions of the training are recorded. The department must have an Academy accredited instructor who is a current class 1 law enforcement officer or an approved attorney **present** during all recorded presentations. Training for other topics must be conducted by Academy accredited instructors who are also current class 1 law enforcement officers using the lesson plans provided. Each agency is responsible for training candidates on the agency's Local Ordinances and Policies. The complete names of instructors and/or attorneys must be listed on the Application for South Carolina Reserve Officer Training Implementation. Any changes to the application or instructors must be approved in advance.

The test will cover all content except Local Ordinances and Policies.

Candidates must be present during the entire training program.

SC Reserve Officer Training Curriculum Revised October 2016

Topics taped by Academy Instructors:

Course Title	Hours	Course Title	Hours
1 Introduction to Criminal Law	3	11 Searches II	3.5
2 Civil Liability	4	12 Searches III	4
3 Probable Cause	2.5	13 Specific Crimes - Crimes Against Persons	3
4 Exclusionary Rule	2.5	14 Specific Crimes - Crimes Against Property	3.5
5 Arrests	2.5	15 Confessions, Interrogation, Miranda Rule	3.75
6 Investigative Detention	2.5	16 Evidence	3
7 First Amendment Issues	1	17 Civil Process	1
8 Ethics & Misconduct in Law Enforcement	2.5	18 Domestic Violence	13
9 Courts, Crimes & Courtroom Procedures	2.5	19 Harassment and Stalking	2
10 Searches I	4	20 Victimology	2
		21 Legally Defensible Use of Force	1.5

Topics where Academy only provides lesson plans:

22 Child Abuse	3.5	27 Officer Survival On and Off Duty	2
23 Juvenile Procedures	3.75	28 Basic Patrol Operations	5
24 Sexual Assault	2.75	29 Strategies of Arrest	2.5
25 Mental Illness and Medical Issues	2.5	30 Vulnerable Adults	3.5
26 Prejudice & Personality (Diversity)	3	31 SALTS (Safe & Legal Traffic Stops)	2

Topics Requiring DT Instructor, Firearms or Driving Instructor to teach Academy lesson plans:

32 PPCT/Use of Force (DT Instructor)	6	35 Firearms (Firearms Instructor)	22.75
33 PPCT/Tactical Handcuffing (DT Instructor)	8.5	36 Emergency Vehicle Operations (EVO)	2
34 PPCT/Weapon Retention (DT Instructor)	3.75	(EVO requires Driving Instructor)	

Topic Departments are responsible for:

37 Local Ordinances and Policies	10
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Total Hours: 150.75 Training Hours + 2 Hour Multiple Choice Test = 152.75

South Carolina Reserve Officer Testing Process

The reserve examination consists of 100 multiple choice test items; all items are cross-referenced to performance objectives. The current passing grade for this examination is 70%.

Upon completion of the training program the department hosting the training will provide the following forms for each candidate:

1. Departmental Training Verification
2. Reserve Firearms, EVO and Local Ordinances/Policies Qualification and Training Verification Form
3. PPCT Proficiency Form (DT Instructor must sign sheet or form will not be accepted)

Upon receipt of the documentation for each candidate, the Standards Unit will review the paperwork for completeness and compare the information to the approved Application for South Carolina Reserve Officer Training Implementation. Provided all paperwork is in order, the Standards Unit will contact the reserve liaison for the department hosting the training to set up a test date at the Academy. Test dates will not be scheduled until all documentation is received for each candidate.

Reserve testing is held at the Academy located at 5400 Broad River Road, Columbia, South Carolina on the first and third Wednesday of each month (excluding holidays or dates when the Academy is closed). The test is administered from 2:00 pm to 4:00 pm. Candidates must be in the classroom before 1:30 pm and present their South Carolina Driver's Licenses. No one will be admitted after instructions have begun.

Candidates should dress in casual business attire. Weapons, manuals, beepers, cell phones, hats, jeans with holes, tank tops, short skirts, low cut tops, shirts with inappropriate messages, flip-flops, and shorts are **not** allowed.

All tests and retests must be completed within 60 days of the last day of the reserve training.

Candidates must be scheduled one week in advance. Agencies must notify the Standards Unit at 803-896-7843 prior to the test date when candidates are unable to attend.

Tests will be scored and notification **emailed** to Chiefs/Sheriffs/Agency Heads **and** Reserve Liaisons (listed on the Application for Approval as SC Reserve Department) within seven working days. Test scores will not be released via telephone or fax. It is vital that all departmental contacts be updated as necessary.

For a successful candidate, a Personnel Change in Status Hire Form must be completed and sent to Ms. Theresa Clark in the Certification Unit within 60 days of the test. This must be done prior to a reserve officer commencing his/her duties. Upon receipt of the hire form, Ms. Clark will contact the department with authorization to begin the reserve officer ride-along requirement within 15 working days.

In the event a candidate fails the test, one retest will be offered. The employing department's reserve liaison must contact the Standards Unit at 803-896-7843 to reschedule the test. This test must be taken within 60 days of the last day of the reserve training.

Candidates who fail the retest may apply to repeat the Reserve Officer Training in its entirety no sooner than one year from the date of the retest failure. Candidates who fail twice are not eligible to attend any Academy mandated training (Basic Law Enforcement, Basic Jail, or Limited Duty) or the Constable program for one year from the date of the retest failure.

Documentation Required Before Reserve Officers Can Begin Ride-Along Requirement

For a candidate who successfully completes the reserve test, a Personnel Change in Status Hire Form must be completed and forwarded to Ms. Theresa Clark in the Certification Unit within 60 days of the test. This must be done **prior** to a reserve officer commencing his/her duties. Upon receipt of the hire form, Ms. Clark will contact the department with authorization to begin the reserve officer ride-along requirement within 15 working days.

Failure to complete and send in the Personnel Change in Status Hire Form may result in loss of a department's reserve status and the candidate may have to repeat the entire training process.

Miscellaneous Facts

A reserve officer is a non-paid volunteer who assists a law enforcement agency in enforcing the laws of South Carolina. Reserve officers **cannot** be paid for road hours or administrative duties. However, S.C. Code 23-28-20(B) states, in part: "The chief, with the approval of the governing body, also shall allow for the compensation of reserve police officers for work done pursuant to Section 23-24-10 [Extra Duty] when compensation for approved public activities would be paid by a party other than the municipality or county. Reserve officers must be paid for approved public activities the same as off-duty police officers. Work performed for compensation must be in excess of the minimum logged service time required by Section 23-28-70 [20 hours per month/60 hours per 3 months]..." (Emphasis Added) No other compensation is allowed for under South Carolina state law.

Every reserve officer must be in proximate contact, by radio or another device, with the full-time class 1 officer to whom he/she is assigned at all times. **Reserve officers cannot supervise or direct activities of Class 1 or Class 3 law enforcement officers or other reserve officers.**

The number of reserve officers cannot exceed the number of regular full-time class 1 law enforcement officers of the department.

Reserve candidates and reserve officers must have a valid SC Driver's License and be a SC resident with a SC street address. A Post Office Box is not acceptable. There is no exception for military personnel.

Reserve officers must maintain a logged service time of 20 hours each month or 60 hours each quarter. Training hours and commuting time to and from duty do NOT count toward logged service time. Any service performed by a reserve officer for which compensation is received (e.g., providing security at athletic events, parades, or similar events) cannot be counted toward the required reserve logged service time of 20 hours each month or 60 hours each quarter.

A reserve officer who cannot meet the requirements for logged service time and monthly/annual training should be terminated until such time he/she is able to comply with the requirements. A PCS of Separation must be submitted to Certification. If a reserve officer is out over 1 year, he/she will require additional training to return. If out over 3 years he/she must complete entire reserve training program.

In-service training shall be held periodically but not less than once a month. Consecutive absences of more than three sessions may be grounds for dismissal. In-service training does not count towards logged service time requirement. Reserve officers and Constables are NOT allowed to attend classes taught at the Academy. They may attend Academy sponsored classes at local departments, but cannot be included on Academy registration forms or tested. The only exception is that Reserve officers may attend and test for RADAR, LIDAR, and SMD.

Annual training must include Legal Update, DV Update, Firearms Qualification, and Agency Policy Updates. Annual training does NOT count toward logged service time requirement.

Reserve officers must complete 240 duty hours with a certified class 1 officer before working alone.

Reserve officers who transfer to full time employment must complete all the requirements as set forth by law as appropriate for the class certification. For example, if a reserve officer is hired as a full time Class 1 law enforcement officer, he/she must complete the entire Basic Law Enforcement training program.

Class 3 officers who leave their position must complete the entire SC Reserve Officer Training Program and pass the examination in order to become a reserve officer.

Currently certified Class 3 officers cannot serve as reserve officers.

A reserve officer can only work for the agency to which he/she is assigned. Reserve officers can only work for one law enforcement agency at a time.

Individuals who work for a law enforcement agency in a **non-law enforcement capacity** may serve as reserve officers upon successful completion of the SC Reserve Officer Training Program and examination. They may **not** count regular work hours towards reserve logged service time of 20 hours each month or 60 hours each quarter.

Reserve status is not covered by military leave. The Department should separate the reserve officer from reserve status, unless he/she is able to continue doing in-service and logged service time each month. A separation of over one year is considered a break in service.

A PCS of Termination must be submitted when a reserve officer is no longer employed.

Any currently certified full-time class 1 law enforcement officer who leaves his/her position under honorable conditions (**except for reasons of disability**) may, within 12 months, at the request of the chief and with the concurrence of the SC Criminal Justice Academy, be issued a registration card identifying him/her as a member of the reserve. Any such officer shall not be required to undergo the preliminary training but shall be required to have a current physical exam. All certifications (except RADAR, LIDAR or SMD) obtained by a class 1 law enforcement officer will be withdrawn when the officer transfers to reserve officer status.

A Class 1 law enforcement officer who transfers to "reserve" status can remain in that status for a period of 3 years from the date of the separation from Class 1 law enforcement. During the 3 year period from the date of separation from Class 1 law enforcement, the officer could transfer back to Class 1 without additional training at the SC Criminal Justice Academy provided there is no break in service (one year or more) before or during this time. While in reserve status the officer must be in compliance at all times as a reserve officer (one in-service training per month and 20 road hours per month/60 road hours per quarter). Reserve officers can complete the same training as Class 1 law enforcement officers; however, this training would be maintained by the Agency, at the Agency and would not be reported to CJA on an MRN form during the time that the officer is in reserve status. This would, however, be helpful to the officer if he/she should decide to return to Class 1 Certification at some time during the three years. Should a reserve officer continue to train with the Class 1 law enforcement officers he/she **MUST** do some type of in-service training each month and his/her road hours. Questions regarding this type of transfer should be addressed to Theresa Clark at 803-896-7804 or thclark@sccja.sc.gov.

Reserve Officers with a Break In Service

Over one year but less than three years:

1. Candidate must complete lines 1-21 and lines 32-37 on page 2 of the Application for South Carolina Reserve Officer Training Implementation). The Department must contact the Standards Unit (803-896-7843) **prior** to training the candidate and submit an Application for South Carolina Reserve Officer Training Implementation, along with a Reserve Candidate Attestation and Authorization to Release Form for each candidate attending the training. Once approved the training can be provided.
2. Upon completion of training, a Departmental Training Verification, Reserve Firearms, EVO and Local Ordinances/Policies Qualification and Training Verification Form and PPCT Proficiency Form (DT Instructor must sign sheet in all 3 areas or form will not be accepted) must be completed for each candidate. The forms should be mailed to Kathy Danielsen, CJA Standards Unit, 5400 Broad River Road, Columbia, SC 29212.
3. Upon receipt of the forms, the Standards Unit will schedule a test date to administer a 50 item, multiple choice examination. All testing must be completed within 60 days of the completion date of the training.
4. A Personnel Change in Status Hire Form must be submitted within 60 days of the test date for candidates who successfully complete the test. Please allow 15 working days to process paperwork.
5. Complete any additional paperwork required by the Certification Unit.
6. Candidate must have a current physical.

Three year break in service:

Candidate must complete entire South Carolina Reserve Officer Training Program.

Transfer of Reserve Officer to Another Department

In order for a reserve officer to transfer to another department, the department the reserve officer is leaving must submit a Personnel Change in Status Report of Separation/Termination Form indicating the date of resignation and that the reserve officer is in good standing with work hours and training.

Note: If the reserve officer is not in good standing with work hours and/or training, the department must indicate how long the reserve officer has not been in compliance. If the reserve officer has a break in service because of the noncompliance, additional training may be required.

The receiving department must furnish the following documentation:

1. Personnel Change in Status Hire Form for the new department.
2. Reserve Firearms, EVO and Local Ordinances/Policies Qualification and Training Verification Form indicating that the reserve officer has:
 - a. Qualified with firearm at the new department.
 - b. Completed 2 hours on the new department's Emergency Response Driving policy.
 - c. Completed 10 hours on the new department's Local Ordinances and Policies.
3. Complete any additional paperwork required by the Certification Unit.

Transfer of Basic or Advanced Constable to a Reserve Officer

1. Basic Constables

Effective immediately, in order for a basic constable to be a reserve officer, the basic constable must complete the entire SC Reserve Officer Training Program and pass the required examination.

In addition, the basic constable must:

- a. Surrender credentials to SLED in writing after passing the reserve examination. SLED must provide a letter to the Academy indicating that constable is in good standing.
- b. Complete any additional paperwork required by the Certification Unit.
- c. Have a current physical.
- d. Complete 240 hours of ride along with Department like a new reserve officer prior to riding alone.

2. Advanced Constables

- a. Advanced Constables who were trained and tested as Basic Constables prior to July 1, 2005, must complete the entire SC Reserve Officer Training Program and pass the required examination.

In addition, the constable must surrender credentials to SLED in writing after passing the reserve examination. SLED must provide the Academy with a letter indicating that the constable is in good standing.

- b. For Advanced Constables who were trained and tested as Basic Constables after June 30, 2005, the following will be required:
 - (1) Constable must surrender credentials to SLED in writing.
 - (2) SLED must provide the Academy with a letter indicating that constable is in good standing.
 - (3) Department must complete a Personnel Change in Status Hire Form. Please allow 15 working days to process paperwork.
 - (4) Department must complete a Reserve Candidate Attestation and Authorization to Release Form.
 - (5) Department must complete a Reserve Firearms, EVO and Local Ordinances/Policies Qualification and Training Verification Form indicating that the constable has:
 - (a) Qualified with firearm at the department as a Reserve officer.
 - (b) Completed Emergency Vehicle Operations and Local Ordinances and Policies.
 - (6) Complete any additional paperwork required by the Certification Unit.
 - (7) Complete 240 hours of ride along with Department like a new reserve officer prior to riding alone.

When a Personnel Change in Status Report Form is Necessary

Personnel Change in Status Report of Separation/Termination is required:

1. When a reserve officer is no longer appointed by your department for the following reasons:
 - a. Reserve officer voluntarily resigns. Indicate whether or not reserve officer was in compliance with training and work hours.
 - b. Termination due to involuntary separation (specify reason).
 - c. Termination due to disqualification (specify nature of disqualification).
 - d. Misconduct resulting in termination (specify reason).
2. When a class 1 law enforcement officer transfers to reserve status within your agency.
3. When a class 1 law enforcement officer voluntarily resigns (in good standing, except for reasons of disability) and is appointed please indicate on the form the date of transfer from class 1 law enforcement to reserve status.

NOTE: A class 1 law enforcement officer can remain a reservist up to three years. If the officer goes over three years and desires class 1 law enforcement certification, he/she must complete the entire Basic Law Enforcement Training program.

Maintaining Reserve Officer's Training File

The following documentation **MUST** be kept in the reserve officer's training file at the employing department:

1. All documentation required by South Carolina law:
 - a. A photo copy of reserve officer's birth certificate.
 - b. High School diploma or GED certification.
 - c. Report of current medical exam, on CJA preplacement & medical history form, with physician attesting medically suitable for law enforcement employment.
 - d. Fingerprint card showing results of SLED and FBI identification fingerprint check. All charges must show a final disposition, plus whether it was a felony or misdemeanor.
 - e. Reserve officer must hold a valid/current SC Driver's License with no record for the past 5 years for suspension as a result of Driving Under the Influence of Alcoholic Beverages or Dangerous Drugs, Driving While Impaired, Reckless Homicide, Involuntary Manslaughter or Leaving the Scene of an Accident.
 - f. A background investigation, including a credit check, has been conducted, and the results are satisfactory.
 - g. A recent photograph.
 - h. A copy of Departmental Training Verification form and firearm qualification.
2. Copy of Personnel Change in Status Hire Form.
3. Time sheet: Hours Reserve Officer worked = 20 hours each month or 60 hours each quarter.
 - a. Duty time consists of:
 - (1) routine patrol and response activities,
 - (2) special events (non-paid), and
 - (3) administrative duties at law enforcement agencies.
 - b. Duty time does NOT consist of:
 - (1) training (monthly, annual, etc.),
 - (2) commuting to and from duty,
 - (3) or working in a paid non-law enforcement position, special events when paid, or at reserve officer's regular employment.
4. Copies of all training attended.
 - a. Annual training for reserve officers must include Legal Update, DV Update, Firearms Qualification, and Agency Policy Updates.
 - b. In-service training must be held periodically but not less than once a month.

For more information, contact Theresa Clark, Certification Unit, at (803) 896-7804 or THClark@sccja.sc.gov.

Constables

The Group 3 Constable Training Programs, both Basic and Advanced, are regulated by SLED.

Direct all questions regarding constables and requests for constable training or testing to Diana White, SLED Regulatory, at (803) 896-8666 or dwhite@sled.sc.gov.



South Carolina Criminal Justice Academy

Certification & Compliance P.O.S.T. Letter



Date: _____

P.O.S.T. Director Name: _____

P.O.S.T. Agency Name: _____

Address: _____

City/State/Zip: _____

Re: _____

SSN: _____

DOB: _____

Dear _____

The above referenced candidate has applied for certification as a law enforcement officer with
(Police or Sheriff's Office) in South Carolina and presented documentation of training and certification
from your state.

In support of the South Carolina Law Enforcement Training Act, Section 23-23-60, the state of South
Carolina requests the following information from your state to process the candidate's application:

- On what date was the above named individual certified as a law enforcement officer in your state?

- Is he/she still serving as a law enforcement officer in your state, if not, when did he/she separate or
terminate employment? _____
- Is he/she currently eligible to serve as a law enforcement officer in your state? _____
- Was he/she ever decertified as a law enforcement officer due to misconduct? _____

I certify that there is no reason to deny law enforcement certification in South Carolina.

Print Name: _____ **Signature:** _____

Title: _____ **Date:** _____

Please complete and return this form to the mailing address listed below. Your prompt response will allow
the above candidate to begin his/her certification process. Please contact the Certification & Compliance
Unit at (803)896-7802 if you should have any questions.

Sincerely,

Lewis J. Swindler, Jr.
Director

5400 Broad River Road, Columbia, South Carolina 29212-3540
Phone: (803) 896-7802 Fax: (803) 896-7803

Revised: 9/7/2016



South Carolina Criminal Justice Academy



REQUESTS FOR TRAINING REVIEWS INSTRUCTIONS FOR COMPLETION

Training Review requests will be conducted for **previously certified SC law enforcement officers** with no other coincidental and/or intermittent out of state law enforcement employment, military or federal training, service and/or employment. The hiring agency's authorized official must complete and submit the one-page TRAINING REVIEW REQUEST FORM and mail to Certification and Compliance or fax to 803-896-7803. The agency's request along with the officer's training file will be reviewed to determine training and certification, previous employment, breaks in law enforcement service, and in-service training requirements. Upon completion of the review, the agency will be notified of the candidate's eligibility and training requirement for certification.

Training Review requests will be conducted for **out of state candidates, and military/federal candidates** with prior law enforcement training, certification and employment. To make a request for out of state training review, an authorized official for the hiring agency must complete and submit the one-page TRAINING REVIEW REQUEST FORM along with the following required documentation prior to Registration:

- (1) Certificate of Completion (Basic Law Enforcement Training Course or Federal Training Course)
- (2) Curriculum/Syllabus showing hours and topics of training.
- (3) Indication that a POST letter has been requested from the out-of-state POST agency. In addition to the POST agency, if the candidate is still employed, also send a POST letter to the current employer.
- (4) Indication that a Letter of Good Standing has been requested for Federal/Military candidates.

Prior to a candidate's registration for training at the Academy, the Training Review Request Form along with the required documentation above should be mailed to: SCCJA, Certification and Compliance Unit, Attention: Kim Stevens, 5400 Broad River Road, Columbia, SC 29212 or fax to 803-896-7803, same attention.

Upon receipt of the complete Training Review package, an initial review will be conducted to determine eligibility and compliance in order for the training review to move forward for final recommendations by Certification & Compliance, Training Operations, and Standards, Special Operations, and authorized approval by the CJA Director. **All out of state candidates with less than one (1) year of law enforcement employment/experience or candidates with no law enforcement employment/experience will have to attend 12 weeks of basic training.**

NOTE: When requesting POST Letter information from other States you must include an "Authorization of Release" signed by the candidate authorizing release of personal information. Include a copy of the requested POST Letter in the package to CJA to show indication that information has been requested from the particular State POST Agency. If POST information is requested with no success of obtaining information from State POST agencies, you must submit a statement on agency letterhead, signed by the Chief, Sheriff or Director, stating multiple attempts to obtain credentials have been without success, along with confirmation that a thorough background investigation was conducted and no discrepancies were found to disqualify for South Carolina certification in accordance with the SC Law Enforcement Training Act.

Please allow up to 10 days for this review. Questions concerning Request for Training Reviews should be directed to Kim Stevens at 803-896-4399 or Jeffery R. Finch at 803-896-7805.

House Oversight Committee

Response to Decertification / Discipline Inquiry

3/29/17

- Are there other states that are providing training to the individual(s) at law enforcement entities that are responsible for issuing discipline at the entity, similar to how the Academy provides training for individuals that serve as instructors for the certain classes at law enforcement entities.

Response: Discipline at the agency level will usually be addressed by the county, municipal or State human resources. Generally governed by policies or procedures established at that level. Law Enforcement misconduct requiring an internal affairs (IA) investigation is usually handled by a law enforcement officer assigned that responsibility by the agency head. Most come from the ranks, were an investigator in another area within the agency, and may or may not have had training in the IA area. As noted in the survey approximately 20% of the agencies who responded employ an IA investigator at their Academy. None require a certification. Our Academy does have an IA investigator but she only handles Academy issues not decertification cases from other agencies across the State. The Academy does offer training on the decertification process in a number of classes taught at the Academy. All of the Basic Law Enforcement students are given a class on how they can lose their certifications as a part of ethics training. Decertification process training is also offered to personnel attending the new Chiefs and Sheriffs workshop as well as those who attend the Training Manager Development Course and the Executive Management course. Training for IA investigators is offered through the Sherriff's Association and the Academy has an IA course that is taught upon request. A number of larger agencies within the State will send their personnel to formal IA training as well.

- Does the Academy believe providing uniform training to the individuals at the law enforcement entities that determine whether or not a Notification of Separation Due to Misconduct is submitted may foster consistency in the type of facts that lead to submitting these forms? Why or why not?

Response: Currently the training offered by the Academy aids with the understanding of the process. However, the decision as to if the facts of a case support misconduct or not rest in the hands of the agency head. After an investigation has been conducted by an agency then the human factor determines if the MRN denotes a normal separation or one for misconduct based upon facts or circumstances. The Academy and the Training Council make every effort to be consistent with the process and rulings involving misconduct. Consistency at that point of the process is extremely critical to ensure fairness and equability.

- Another question that was asked of the Academy was to determine how other State Academies' / POSTs are funded? The results of the survey conducted through IADLEST is listed below:

51.6% funded through state/general fund. Of these:

43% primarily use court costs and tickets as primary funding (fines and fees)

43% primarily use their state's general fund

13% primarily use state taxes or insurance premiums

32% funded by candidates attending training

16% funded by agencies sending candidates for training