# **IN-SERVICE TRAINING COORDINATOR**

## Agency Record of Person Designated as In-Service Training Coordinator

Form F-18 (ITC) (Rev. 03-2023)

Criminal Justice Standards Division Post Office Drawer 149 Raleigh, NC 27602 (919) 661-5980 Fax (919) 779-8210 Email Completed Form to: Instructor@ncdoj.gov Sheriffs' Standards Division Post Office Box 629 Raleigh, NC 27602 (919) 779-8213 Fax (919) 662-4515 Email Completed Form to: sevans@ncdoj.gov

#### Must Be on File with Criminal Justice Standards Division or Sheriffs' Standards Division Prior to Agency Authorizing this Person to Sign In-Service Training Records Attach Copy of NCJA Training Course Completion Certificate

## Instructions:

- 1. Please type or print clearly.
- 2. This form is to be completed by the applicant, signed by the agency head/designee, and submitted to the Commission at the address listed above.
- The applicant must have four (4) years of practical experience as a criminal justice officer or as an administrator or specialist in a field closely related to the criminal justice system <u>and</u> hold general instructor certification <u>and</u> have successfully completed the In-Service Training Coordinator Course.
- NOTE: A new form F-18 <u>MUST</u> be completed and submitted to the Standards Division whenever a new In-Service Training Coordinator is designated by an agency.

Agency Name:	_ Phone Number:
Agency Address:	
Applicant Name:	
(First, Middle, Last)	Email Address
Instructor Certificate # (REQUIRED):	Date of Birth
In-Service Training Coordinator Course: (Location and Date Comp	pleted)
I attest that the above named applicant meets the requirements as set forth above.	
Agency Head (Print Name)	
Agency Head Signature & Date	Email Address

## (Staff Use Only)

The above named applicant is hereby authorized to perform the duties and responsibilities of In-Service Training Coordinator as set out in 12 NCAC 09E .0110 or 12 NCAC 10B .1706.