NORTH CAROLINA DEPARTMENT OF JUSTICE
SHERIFFS' STANDARDS DIVISION

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RICHARD SQUIRES
DIRECTOR

PRE-DELIVERY REPORT
DETENTION OFFICER CERTIFICATION COURSE

FORM F-7A

INSTRUCTIONS: Please print or type all information clearly. This form is to be completed by the School Director and submitted to the Sheriffs' Standards Division **a minimum of 30 days** prior to the beginning of course delivery along with required attachments in accordance with Rule .0704(a)(6)(A) and (B). This report must include: (a) an outline of the course including topics and hours; and (b) the names of the instructors; (c) a printed course schedule; (d) any delivery site rules and regulations not included in the minimum standards for course delivery. Pre-deliveries can be emailed to sstraining@ncdoj.gov.

DELIVERY SITE:

Name of Accredited Institution/Agency	Mailing Address
School Director	Telephone Number Cell Number, etc.

PROPOSED COURSE:

Title: DETENTION OFFICER CERTIFICATION COURSE

Hours of Instruction: _____

Location of Delivery: _____

Date Course Begins: _____

Class Schedule: _____ am/pm Until: _____ am/pm Days per week: _____

Anticipated Date and Time for State Examination: _____ am/pm   Number of Students: _____

Comments: _____

NOTE:

In accordance with Rule .0605(a) which reads as follows:

> **"The School Director may develop supplemental rules as set forth in 12 NCAC 10B .0704(a)(6), but may not add substantive courses, or change or extend the substance of the courses set forth in 12 NCAC 10B .0601. This Rule does not prevent the instruction on local agency rules or standards but such instruction will not be considered or endorsed by the Commission for purposes of certification."**

if additional hours have been added to the minimum required 174 or 73 hours please explain the reason for the increase, and be specific as to the addition of instruction hours, or course content, if any.

CERTIFICATION: In my official capacity as School Director and as a duly authorized representative for my institution/agency, I submit this report and certify that to the best of my knowledge and belief, there are no willful misrepresentations, omissions or falsifications in the foregoing statements and information. I herewith give notice of my intention to proceed with delivery of the Detention Officer Certification Course and certify that the presentation/delivery will be in accordance with the Rules codified as Title 12, Chapter 10B, Sections .0600, .0700, .0800, and .0900 of the North Carolina Administrative Code.

_____   _____
School Director Signature   Date

If you have additional personnel you would like to have access to this class in Acadis, please add them below. The people added must already have been granted overall access.

Name:_____
Role:_____
Email address:_____

Name:_____
Role:_____
Email address:_____

Name:_____
Role:_____
Email address:_____