IN-SERVICE TRAINING COORDINATOR

Criminal Justice Standards Division
Post Office Drawer 149
Raleigh, NC 27602
(919) 661-5980
Fax (919) 779-8210

Form F-18 (ITC)
(rev. 1/17/13)

Sheriffs' Standards Division
Post Office Box 629
Raleigh, NC 27602
(919) 779-8213
Fax (919) 662-4515

Agency Record of Person Designated as In-Service Training Coordinator

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.
3. 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 **and** hold general instructor certification **and** have successfully completed the In-Service Training Coordinator Course.
4. **NOTE:** A new form F-18 **MUST** 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: _____
(Street/PO Box, City, Zip)

Applicant Name: _____ _____
(First, Middle, Last) Email Address

Instructor Certificate # (If Available): _____ _____
Date of Birth

In-Service Training Coordinator Course: _____
(Location and Date Completed)

I attest that the above named applicant meets the requirements as set forth above.

_____
Agency Head/Designee (Print Name)

_____ _____
Agency Head/Designee 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.

_____ _____
Division Authorizing Representative Signature Date