

NORTH CAROLINA DEPARTMENT OF JUSTICE SHERIFFS' STANDARDS DIVISION

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DIANE KONOPKA DIRECTOR

PRE-DELIVERY REPORT TELECOMMUNICATOR CERTIFICATION COURSE

FORM F-7A-T web version

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 <u>a minimum of 30 days</u> prior to the beginning of course delivery. This report must include: (a) an outline of the course including topics and hours; and (b) the names and social security numbers of the instructors; (c) a printed course schedule; and (d) any delivery site rules and regulations not included in the minimum standards for course delivery.

Name of Accredited Institution/Agency	Mailing Address	
Traine of recreated institution/rigoricy		
School Director	Telephone Number	Pager Number, etc.
PROPOSED COURSE:		
Title: TELECOMMUNICATOR CERTIFICATION COU	RSE	
Hours of Instruction:	Number of Students:	
Location of Delivery:		
Date Course Begins:		
Class Schedule: am/pm Until: am/pm D	ays per week:	
Anticipated Date and Time for State Examination: Date:	Time: am	/pm
Comments:		
CERTIFICATION: In my official capacity as Schoinstitution/agency, I submit this report and certify that to misrepresentations, omissions or falsifications in the foregoing to proceed with delivery of the Telecommunicator Certifica accordance with the Standards of the North Carolina Sheriffs	o the best of my knowledge and g statements and information. I herevalue of the course and certify that the particular course and certify that the particular course and certify that the particular course are considered.	belief, there are no willfu with give notice of my intention resentation/delivery will be in
School Director Signature		Date