LIDAR MOTOR SKILL PERFORMANCE TEST

☐ CHECK IF RE-TEST

Trainee Full Name ________________________________

Law Enforcement Agency ________________________________

Date of Birth _______________ Last 4 Digits SSN ________________________________

Description of LIDAR

Manufacturer: ____________________________________ Mode: ______ STATIONARY

Model: ____________________________________

INSTRUCTOR INITIALS AS TRAINEE PERFORMS CORRECTLY ON EACH STEP

A. The trainee shall identify to the instructor each component and attachments thereof for this LIDAR unit.

B. The trainee shall identify and explain to the instructor all controls, indicators and adjustments and the individual purpose and functions of each for this LIDAR.

C. Internal Accuracy Test

   1. Power Switch Off
   2. Plug in Power Cord
   3. Power Switch On
   4. Performance Light Test
   5. Verify Internal Circuitry Test

D. External Accuracy Test

   1. Range and Audio Tone Adjustments
   2. Sight Alignment Test
   3. Range Accuracy Test

I hereby certify that the above-named trainee ________________ demonstrated one hundred (100) percent competence in each motor-skill or performance as noted on this form. Date ________________________________

INSTRUCTOR'S SIGNATURE ___________________________ CERTIFICATION NO. ___________________________

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