TENNESSEE PEACE OFFICER STANDARDS AND TRAINING COMMISSION

APPLICATION FOR INSTRUCTOR CERTIFICATION

NAME:					
NAME: ,			(First)	(Middle)	
ADDRESS:			. 1	,	
ADDRESS:	(Street)		(City, State)	(Zip Code)	
TELEPHONE: (Home)) <u>() </u>		(Work) ()		
ACENCY:					
AGENCY:	(Name))		(Telephone)	
	(Address	3)		(Fax)	
		TYPE OF CERTIF	FICATION		
GENERAL – L	imited to full-time inst	tructors assigned to B	asic Police Academies.		
SPECIALIZED	– Lesson Plans for e	each specialized area	must be attached.		
GENERAL DE	PARTMENTAL – Lim	nited to POST approve	ed training officers.		
SPECIALIZED:		subject areas for spe each subject must be			
Crime Preventi	ion	K-9			
Criminal Law		Patrol Techniques			
Defensive Driv	ing	Physical Training			
Defensive Tac	tics	Police Management			
Drugs-Narcotic	cs	Police Stress			
Emergency Me	edical	Sex Crimes			
Fingerprinting	Fingerprinting				
Firearms					
Investigative T	echniques				
Juvenile Law					
		EDUCATIO	ON		
High School Diploma					
GEP Equivalent	(Year)	(Type)	(L	(Location)	
COLLEGE				0.1.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	
	(Year)	(Type Degree)	(College	ge/University)	
	(Year)	(Type Degree)	(Calla	ge/University)	
	(Teal)	(Type Degree)	(Colle	40/ UTIIVCTOILY)	

Agency Name and Address		Date of Employment		Title and Duties
				-
LAW ENFORCEMENT TRAINING:	Forty Hours tr be certified.		in each subject a of certificates.)	area for which applicant wishes to
Course of Instruction	Date	of Training	Instructor/Loc	cation
<u>Course of includency</u>	<u>Dato</u>	<u>or rraining</u>	mon doton Lov	sauon
			-	
INSTRUCTOR TRAINING: (Attack	ch copy of certific	cates of complet	ion.)	
Course of Instruction	Date	of Training	Instructor/Lo	cation
Instructor Development (Required)		_		
instructor Development (Nequired)				
Compliance Statement: I certi	fy that the inform	nation supplied i	n this application	n is true and correct.
(Data)			(Cianati	use of Applicant)
(Date)			(Signati	ure of Applicant)
(Date)			(Signature	of Training Director)
(Date)			(Signature	e of Agency Head)