

NORTH CAROLINA DEPARTMENT OF JUSTICE
SHERIFFS' EDUCATION AND TRAINING STANDARDS DIVISION
STUDENT COURSE COMPLETION RECORD
DETENTION OFFICER CERTIFICATION COURSE

This form should be completed for every detention officer certification course enrollee

Host Institution/Agency: _____

Number of Training Hours: _____

Instrument Used for Reading Assessment: _____ Reading Grade Level: _____

Student Name: _____

SS# _____

DOB: _____

Employing/Sponsoring Agency or Self-Sponsor: _____

Trainee Status:

Full-Time [] Partial Enrollee []

Completion Status **(Place one mark for the appropriate outcome)**

Successful Completion [] Failed State Exam []
Deficiencies [] Withdrawal [] Withdrawal Date: _____

NOTES:

Please record the trainee's quiz results and reading level in the corresponding blocks.
 For the physical assessment block use a C for completed and DC for did not complete.

UNIT I - LEGAL		Test	Re Test	UNIT II - PHYSICAL		Test	Re Test	UNIT III - PRACTICAL		Test	Re Test	UNIT IV - MEDICAL		Test	Re Test
1.Orientation				1. Contraband Searches				1. Processing Inmates				1. First Aid/CPR			
2.Criminal Justice System				2. Patrol and Security				2. Supv. and Management				2. Medical Care			
3.Legal Aspects				3.Key and Tool				3. Suicide				3. Stress			
4.Intro to Rules and Regs				4. Inv. Processes in the Jail				4. Aspects of Mental Illness				4. Subject Control			
5.Ethics				5. Transportation of Inmates				5. Fire Emergencies				5. Physical Fitness			
								6. Notetaking/Report Writing							
								7. Communication Skills							
EXAM DATE:_____				EXAM DATE:_____				EXAM DATE:_____				EXAM DATE:_____			
RE-EXAM DATE:_____				RE-EXAM DATE:_____				RE-EXAM DATE:_____				RE-EXAM DATE:_____			

This document represents student performance, as well as topics covered.
 Training Specialist - Sheriffs' Standards Division