PEACE OFFICER STANDARDS AND TRAINING
Field Training Manual Completion Form (IV-2)

Return this page only to POST

Name of Officer	Academy Class Number	Date of Academy Class
Agency	POST ID # __ __ __ __ - __ __ __ __ - __ __ Last 4 #s of SSN / First 4 Letters of First Name / Day of Birth (01-31)	

Discipline ☐ Patrol ☐ Detention ☐ Felony Probation & Parole ☐ Correction ☐ Emergency Communications ☐ Juvenile Corrections ☐ Juvenile Detention ☐ Juvenile Probation ☐ Adult Misdemeanor Probation

Name of Field Training Officers	Field Training Dates From:	To:
1.		
2.		
3.		
4.		

This will enable the department to determine who the field training officers were for the officer, the supervisor accepting the record of completion, the officer attesting that he or she has been instructed in all the items, and the department head attesting that the officer has satisfactorily completed the field training program.

It is recommended that a copy of this record be retained in the officer's personnel file in the department.

I have been instructed in all items as recorded in this field training guide.		Reviewed by	
_____ Officer signature	_____ Date	_____ Training Reviewer signature	_____ Date

Remarks:

The agency head attests to the completion of the field training manual.

_____ Agency Head signature

_____ Date