APPENDIX SAMPLE FORM

POLICE TRAINING PROGRAM (PTP) COMPLETION RECORD / COMPETENCY ATTESTATION

Badge/ID	Evaluation Period	Report Date	
	From: To:		
Badge/ID	Police Training Officer (PTO)	Badge/ID	
		From: To:	

Ph	Name of PTO or PTE and Badge/ID	Sector/Beat Assignment	Patrol Dates	(inclusive)
Α			FROM	то
В			FROM	ТО
С			FROM	ТО
D			FROM	то

I have been instructed in all items recorded in the **Police Training Program Guide**.

Trainee Signature	Date
I certify that Officer/Deputy	has received the
instruction outlined in the Police Training Program Guid	
outcomes. I also certify that all tests have been complet	
Primary PTO Signature 🕨	Date
	Date
PTP SAC Signature	Date

I attest that the above named trainee has satisfactorily completed the prescribed **Police Training Program** and is competent to perform as a solo patrol officer.

Agency Head Signature