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| **NCDPS Standards for general instructor (GI) Certification:** |
| 1. **Acquired four years of practical experience in North Carolina as a criminal justice officer or as an administrator or specialist in a field directly related to the criminal justice system.**
2. **No active or pending disciplinary actions.**
3. **Must pass a Reading Comprehension Test with a minimum score of 10th Grade equivalency.**
4. **Must successfully complete 8 hours of Microsoft Word and 8 Hours of Microsoft PowerPoint training.**
5. **Must agree to seek / attend Specialty Instructor Training within two (2) years of General Instructor Certification.**
 |
| **applicant information:** |
| **LAST Name:** |       | **First nAME:** |       | **MI:** |       |
| **Personnel**#: |       | **DOB:** |       | **Gender:** | **[ ]  Male** | **[ ]  Female** |
| **Location:** |       | **Job Title:** |       |
| **Mailing Address:** |       | **City:** |       |
| **State:** |       | **Zip CODE:** |        | **County:** |       | **Phone #:** | (   )       |
| **Fax #:** | (   )       | **E-mail Address:** |       |
| **L.E. / Criminal Justice work Experience:** | **specialized instructor Interests:** |
|  | **Years** | **Months** | **You may check more than one!** |
| **Law Enforcement Exp.:** |       |       | **[ ]  Baton** | **[ ]  Cell Extraction** | **[ ]  CRDT** |
| **Adult Corrections Exp.:** |       |       | **[ ]  Firearms** | **[ ]  OC Pepper Spray** | **[ ]  RCDT** |
| **Juvenile Justice Exp.:** |       |       | **[ ]  staff & offender** | **[ ]  Unlawful WPH** | **[ ]  Wellness** |
| **Other CJ Exp. (LIST):** |       |       | **Explanation:**       |
| **Application Approvals:** |
| 1. **Work Location Training Coordinator / TRAINING Specialist:**
 |
| **I attest that the information above is accurate and the candidate meets all General Instructor standards.** |
| **Name:** |  |
| **E-Signature:** |  | **Date:** |  |
| 1. **Work Location Manager (Facility Head, area, Division, Section Administrator):**
 |
| **I attest that the information above is accurate and the candidate meets all General Instructor standards.** |
| **Name:** |  |
| **E-Signature:** |  | **Date:** |  |
| 1. **Division / Section Training Coordinator:**
 |
| **I ATTEST THAT THE INFORMATION ABOVE IS ACCURATE AND THE CANDIDATE MEETS ALL GENERAL INSTRUCTOR STANDARDS.** |
| **Name:** |  |
| **E-Signature:** |  | **Date:** |  |
| **Return address for correspondence:** |
| **NCDPS - Office of Staff Development and Training; Attention - Michael Lamonds, GI Qualified Assistant** |
| **Physical Address:** | **2211 Schieffelin Road****Apex, NC 27502****direct #: (919) 367-7113** | **Mailing****Address:** | **MSC 4213****Raleigh, NC 27699-4213** **Fax: (919) 367-7180** | **E-mail:** **michael.lamonds@ncdps.gov** |