Commonwealth of Virginia
Virginia Department of Criminal Justice Services

Field Training for Court Security Officers (Form CS-1)

Officer's Name: _____ Social Security #: _____

Department: _____

Academy Attended: _____

Academy Completion Date: _____

Performance Outcome	Date of Completion	Printed Name of Field Training Officer	Signature of Field Training Officer
Department Policies, Procedures and Operations			
9.1			
9.2			
9.3			
9.4			
9.5			
9.6			
9.7			
9.8			
Public Safety Response to Terrorism			
9.9			
9.10			
9.11			
9.12			
9.13			
Use of Force, Weapons Use			
9.14			
9.15			
9.16			
General Tasks			
9.17			

I certify that the above referenced officer has demonstrated competency in all the performance outcomes listed on this form, in compliance with §9.1-102 of the Code of Virginia (1950) as amended, 6VAC20-20-40 Virginia Administrative Code and the regulations of the Criminal Justice Services Board.

Printed Name **Signature of Agency Administrator** **Date**

Virginia Department of Criminal Justice Services
1100 Bank Street ■ Richmond, VA 23219
www.dcjs.virginia.gov

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