The Oregon Drug Evaluation Classification (DEC) Program has received national acclaim for its success in identifying the drug-impaired driver. Officers trained as Drug Recognition Experts (DREs) are frequently called upon to differentiate between drug influence and medical and/or mental disorders. The certified DRE is an extremely valuable tool in combating the adverse impact of drug and alcohol impaired driving in our communities.

DRE School is extremely demanding. To receive certification as a DRE, three phases of training must be completed. The following summarizes each phase:

**ACADEMIC TRAINING (Phase I & II):**

This phase is typically conducted over nine days (72 hours). It includes courses in physiology, vital signs, standardized field sobriety testing (SFST), and extensive material on each of the seven categories of the drugs of abuse. The training includes three written examinations, an SFST proficiency examination and five written quizzes. Students must achieve a minimum of 80% average on the five quizzes, 80% on the three examinations, and must demonstrate 100% proficiency in administering SFST’s.

**CERTIFICATION PHASE (Phase III):**

This phase is typically conducted over five days (40-50 hours). After successfully completing the academic portion, the students must complete the certification phase. It is the student's responsibility to complete the certification requirements within six months following the DRE School. These requirements include: conducting a minimum of 12 drug influence evaluations while under the supervision of a DRE instructor; identifying subjects under the influence, and attaining a 80% toxicological confirmation rate. In addition, the student must maintain a progress log, rolling log and submit a written curriculum vitae. Finally, the student must pass a comprehensive final knowledge examination, and obtain the written endorsement of two certified DRE instructors.

The International Association of Chiefs of Police (IACP) and the Oregon DECP Policies and Procedures are the regulating body for the DEC Program. Certification is valid for two years. In order to maintain certification, DRE’s must conduct a minimum of four evaluations (one observed in front of an instructor) every two years, submit an updated rolling log and curriculum vitae, and attend 8-hours of re-certification training.
To be considered for DRE training, the applicant must meet the following criteria:

- Must have a minimum of two years of law enforcement service.
- Must be off probation with your agency.
- Must be working in patrol with your agency.
- Must be SFST, DID (Drugs that Impair Driving), and Intoxilyzer 8000 certified.
- Must have a reasonable background and experience level of making DUII arrests.
- Must have a written endorsement/recommendation from your local prosecutor.
- Must submit two actual DUII arrest reports for review.
- Must submit the names of two local DREs who recommend you for the training.

To assist in the selection of quality personnel for the Oregon DEC Program, please complete the following information:

Date and type of SFST training (Date): ____________________  □ 16 hours or □ 24 hours

Have you attended ARIDE?  □ No  □ Yes  □ Online ARIDE (date of training): __________

Number of DUII arrests in the last 2 years: ________________

Number of Possession of a Controlled Substance (PCS) arrests in the past 2 years: __________

Summarize your prior assignments related to, or of interest to, the DRE Program:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Summarize your formal education, work or practical experience, and training that may be related to, or may be of interest to, the DEC Program (EMT training, college, etc.):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

How do you expect DRE training to benefit you and your Department?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Is there anything else you would like the DRE Selection Committee to know about your interest in DRE?

________________________________________
________________________________________
________________________________________

List two DREs that would recommend you for DRE training (They will be contacted if listed):

________________________________________
________________________________________
________________________________________

List a local prosecutor that will recommend you for DRE training (enclose written recommendation):

________________________________________

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I have read and understand the Oregon DECP Policies and Procedures regarding the DRE Training and Certification Process.

Applicant’s signature: ________________________________ Date: __________

If a student withdraws from the DRE full school, field certifications, and/or the final knowledge exam (excludes PRE School) or is unwilling to complete the training process for any reason except for those outlined in the Oregon DECP Policies and Procedures, then the sponsoring agency is responsible for reimbursing the Oregon DECP for any expenses accrued.

I understand and agree that any certified Drug Recognition Expert (DRE) with our agency will be available to other law enforcement agencies to perform a DRE Evaluation. If overtime is accrued, the DRE overtime grant will pay for the callout. ______ (Commanding Officer’s initials)

Incomplete applications or missing signatures will not be considered.

I have read the listed requirements and I recommend this officer for DRE training.

Supervisor’s signature: ________________________________ Date: __________

Commanding Officer’s signature: ________________________________ Date: __________

Commanding Officer’s Name (printed): ________________________________

Return the completed form to:
Sergeant Evan Sether
Oregon State Police
255 Capitol Street NE 4th Floor
Salem, OR 97310