



DPSST Approved Equivalent Field Training Manual Completion Record

F38

 Revised
10/9/23

 Email: certification.scheduling@dpsst.oregon.gov; Mail: 4190 Aumsville Hwy SE; Salem, OR 97317
 Questions? Call DPSST at 503-378-4411 or email certification.scheduling@dpsst.oregon.gov

Instructions	Only agencies having received a DPSST Approved Equivalent Field Training Identification number may utilize this form to report completion of an officer's field training.			DPSST Approved FTM Identification Number
	This form serves as an acknowledgement from the Officer, Field Training Officer and Department Head that all required components of the DPSST approved Equivalent Field Training Manual have been completed. Officers must be evaluated and demonstrate acceptable knowledge of the components reflected in the DPSST approved Equivalent Field Training Manual. Completed field training manuals must be maintained at the employing agency.			
Officer	Last Name	First Name	Middle Name	2. DPSST Number
	Agency:			
Officer Attestation	I attest that I am the individual listed above and I have completed the above referenced DPSST approved Equivalent Police Field Training Manual. I understand that by signing this document with false information makes all of my DPSST certification(s) subject to denial, suspension or revocation under ORS 181A.640 and OAR 259-008-0300.			
Field Training Officer Attestation	Signature _____		Date _____	
	Printed Name _____		Title _____	DPSST No. _____
	Email Address _____		Phone _____	
Department Head Attestation	I attest that I am the Department Head or hold DPSST Certification and am authorized by the Department Head to sign below. I certify that the information entered on this form has been verified and is substantiated by records maintained by my agency. If certified by DPSST, I understand that falsification of this document makes all of my certification(s) subject to denial, suspension or revocation under ORS 181A.640 and OAR 259-008-0300.			
	Signature _____		Date _____	
	Printed Name _____		Title _____	DPSST No. _____
DPSST USE Only				Entered by/date