

# Procedure for Completing the Sworn Statement of Student for Trainings Conducted Remotely

As part of the DPSST's commitment to maintaining the highest standards of training and certification, we have implemented a new procedure for all approved remote instructors to complete the *Sworn Statement of Student* section of the Form PS-6. This new procedure is **required for any course taught remotely** and is crucial for ensuring compliance with our training standards and regulatory requirements.

Here is that process:

## Completion of Training

After a student has completed the required training, assessment, and examination, instructors should email each student the content of the "Sworn Statement of Student (Remote Training)" email (provided below). Each student must then reply to the instructor's email after completing the required information. All fields must be completed by the student to be acceptable.

To: your student Bcc

Cc

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Sworn Statement of Student (Remote Training) Draft saved at 12:24 PM

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**Directions**  
The following information is to be completed by the student and returned via email reply to the instructor for submission with the student's application or renewal information.

Students should retain a completed copy of this email for their own records.

**Sworn Statement of Student (Remote Training)**  
To the student:  
After you have completed training, provide your full name, the date, and the total hours of remote training completed in the spaces provided below to complete the Sworn Statement of Student section of the PS-6. Your name below must match the name recorded in the "Student" section of the PS-6.

I hereby acknowledge and understand that falsification of this document subjects my certification(s)/license(s) to potential denial, suspension, or revocation under ORS 181A.870 and OAR 259 Division 60. Under penalty of perjury, I swear or affirm that I have attended and completed the required remote training, assessment, and examination in English without assistance, for the total hours listed below. I confirm that my participation was continuous and without any unauthorized aid, as detailed by the training guidelines.

Please type your full name below to serve as your signature acknowledging this statement:  
Typed Signature: [Full Name]

Date: \_\_\_\_\_  
Total Hours of Remote Training Completed: \_\_\_\_\_  
Please reply to this email with your typed signature to confirm the above statements.

## Student Responsibility

Students complete the Sworn Statement of Student section for the Form PS-6 by completing the following steps:

1. Enter their full name (as recorded in the Student Section of the PS-6) in the space after the "Typed Signature";
2. Enter the date and total hours of Remote Training Completed; and
3. Email this information back to the instructor.

Students should keep a copy of this completed statement for their records.

### **Instructor's Responsibility**

1. Upon receiving the completed Sworn Statement via email from the student, instructors must keep a copy of each completed email to accompany the student's PS-6 for the instructor's training records.
2. Additionally, remote approved instructors are responsible for submitting the Sworn Statement, **and** the student's completed PS-6 form to the DPSST.

Adhering to this process is vital for ensuring the integrity of our certification programs and meeting the requirements set forth under ORS 181A.870 and OAR 259 Division 60. This procedure also helps us maintain accurate records and supports the verification of training completion in case of audits.

Thank you for your cooperation and commitment to upholding our training standards. If you have any questions or require further clarification regarding this new procedure, please do not hesitate to contact me.

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### Email to Students

#### **Subject Line: Sworn Statement of Student (Remote Training via Email)**

#### **Directions**

The following information is to be completed by the student and returned via email to the instructor for submission with the student's application or renewal information. Students should retain a completed copy of this email for their records.

#### **Sworn Statement of Student (Remote Training)**

After you have completed training, provide your full name, the date, and the total hours of remote training completed in the spaces provided below to complete the Sworn Statement of Student section of the PS-6. Your name below must match the name recorded in the "Student" section of the PS-6.

I acknowledge and understand that the falsification of this document subjects my certification(s)/licensure(s) to potential denial, suspension, or revocation under ORS 181A.870 and OAR 259 Division 60. Under penalty of perjury, I swear or affirm that I have attended and completed the required remote training, assessment, and examination in English without assistance for the total hours listed below. I confirm that my participation was continuous and without unauthorized aid, as detailed by the training guidelines.

Please type your full name below to serve as your signature acknowledging this statement:

Typed Signature:   [Full Name]  

Date:                                 

Total Hours of Remote Training Completed: