MIKE DEWINE
OHIO ATTORNEY GENERAL

Ohio Peace Officer Training Commission
Office 800-346-7682
Fax 740-845-2675

P.O. Box 309
London, OH 43140
www.OhioAttorneyGeneral.gov

PRIVATE SECURITY BASIC TRAINING PROGRAM
SPECIAL TOPIC INSTRUCTOR APPLICATION

The application must be completed in its entirety, signed, and notarized. Attach additional documentation as requested. The following criteria must be met:

- Must be a high school graduate or possess a GED
- Must be licensed, degreed, or professionally certified in the area of requested topics. Must have a minimum of two years experience.
- Completion of OPOTC-approved 80-hour Instructional Skills course, or 40-hour Instructional Skills course and 14-hour update, or Bachelor's Degree in Education
  - Exceptions to the training requirements are:
    - Attorneys licensed in the state of Ohio who apply for Special Subject certification in any legal topic. (Submit a copy of your attorney registration card.)
    - Duly qualified First Aid instructors for American Heart Association, Red Cross, or American Safety and Health Institute. (Submit a copy of your instructor card.)
    - Duly qualified Special Topic Instructors in Homeland Security topics
- Recommendation of a currently-approved OPOTC Private Security commander in good standing
- A recent criminal history report conducted by BCI&I

Utilize the curriculum sheet on the last page of the application to indicate the units/topics in which the instructor desires certification.

Return application with all supporting documentation to:

Ohio Peace Officer Training Commission
Professional Standards Division
P.O. Box 309
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PROCEDURE FOR OBTAINING A FINGERPRINT-BASED BACKGROUND CHECK FROM THE BUREAU OF CRIMINAL INVESTIGATION AND IDENTIFICATION (BCI)

Fingerprint-based criminal history checks are required for Private Security instructor and commander certification.

In order to obtain a BCI Criminal Background Check you must submit a WebCheck request to BCI, from an approved WebCheck agency. In order to obtain such a record check, follow this procedure:

- Log onto the Attorney General of Ohio's WebCheck website: www.ohioattorneygeneral.gov.
- Scroll to the bottom of the page and click on "Webcheck Locations" under the "Services" heading.
- Locate an agency nearest you and contact them regarding the WebCheck process.
- After completing the WebCheck procedure, have your WebCheck result sent back to you, so that you can attach it to your application.
- Mail your completed application packet to:

Ohio Peace Officer Training Commission
Professional Standards Division
PO Box 309
London, Ohio 43140

Applications received by the commission that do not have the BCI processed record check attached will be returned unprocessed.

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PEACE OFFICER TRAINING COMMISSION

Ohio Peace Officer Training Commission
Office 800-346-7682
Fax 740-845-2675

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APPLICATION FOR TOPIC INSTRUCTOR CERTIFICATE

(Please type)

Name _____ _____ _____
First Middle Last

SSN_____ DOB _____ Male ____ Female ____

Mailing
Address _____
#/Street/P.O. Box

_____ _____ _____ _____
City State Zip Code County

Phone: Residence (_____)_____ Daytime (_____)_____

Cell (_____)_____ FAX (_____)_____

Email _____
NOTE: This email address will be used for OPOTC/OPOTA business-related communications, some of which may be time sensitive.

☐ At times we receive requests for information on instructors approved to teach a particular topic. By checking this box, you are authorizing OPOTC staff to release information about your instructor certification which would allow others to contact you in their efforts to find an instructor.

1. TRAINING/EDUCATION

Secondary Education Information

High School Attended _____ City & State _____

Date of Graduation or Date of Receipt of GED ____/____/____ (Circle Graduation or GED, whichever is applicable.)

College/University Information

Institution Attended _____ City & State _____

Course of Study/Major _____ Dates Attended: From ____/____/____ To ____/____/____

Diploma/Degree Awarded (if applicable)
_____ Date _____/_____/_____
(Attach Copy of Degree/Diploma)

If no degree, number of quarter hours _____ semester hours _____ attended.
(Attach Copy of Transcript from College/University showing number of hours attended)

2. TRAINING IN THE SUBJECT AREA TO BE TAUGHT

Note: Attach only copies of training certificates applicable to the areas for which you are seeking certification.

Name of School Attended	Course Title	Course Length (In Weeks)	Date Completed	Cert/Lic (Y) (N)

3. FULL-TIME EXPERIENCE IN THE SUBJECT AREA TO BE TAUGHT

Agency Name	Title/ Position	Employment Dates (From - To)	Total Number of Yrs/Mos Employed

4. COMPLETION OF A COMMISSION-APPROVED INSTRUCTIONAL SKILLS COURSE

(After July 1, 2009, 80-Hour Instructor Skills required. After August 1, 2007, 40-Hour Instructor Skills and 14-Hour Update required.)

NOTE: IT IS REQUIRED THAT YOU ATTACH A COPY OF YOUR 40/80 HOUR INSTRUCTOR TRAINING CERTIFICATE AND INSTRUCTOR SKILLS 14-HOUR UPDATE

Name & Address of Instructor Skills School Completed	Dates Attended (From - To)	Number of Clock Hours	Date Course Completed

Name & Address of Instructor Skills 14-Hour Update School Completed, if applicable	Dates Attended (From - To)	Number of Clock Hours	Date Course Completed

5. CRIMINAL HISTORY

Have you ever been convicted of a felony in any jurisdiction of the United States or under the Uniform Code of Military Justice? _____no _____yes

Have you ever been convicted of an offense of domestic violence or any related offense occurring as a result of a domestic violence incident? _____no _____yes

Do you currently have criminal charges pending in any jurisdiction? _____no _____yes

Have you ever been investigated for, disciplined for, terminated for, matters of veracity or of moral turpitude? _____no _____yes If yes, include a detailed summary.

Attach copy of criminal record check processed through BCI to the completed application.

***MUST* APPEAR *IN PERSON* BEFORE A NOTARY TO COMPLETE THE FOLLOWING AFFIDAVIT**

AFFIDAVIT

I declare under the penalty of perjury that the information in this Application is true and correct to the best of my knowledge.

_____ _____
Signature Date

Subscribed and sworn personally before me by the above-named Affiant, this _____ day of _____ , 20____ , at _____, in the County of _____, and State of Ohio.

_____
Printed name of Notary

(Seal)

_____
Signature of Notary

_____
Date notary commission expires

THIS SECTION TO BE COMPLETED BY COMMANDER ONLY

RECOMMENDATION BY AN APPROVED PRIVATE SECURITY COMMANDER

Pursuant to the Rules and Regulations specified in of the Ohio Administrative Code, I recommend the above named individual receive a Topic Instructor certificate for the topics indicated on the attached form. For purposes of making this recommendation, I am a current Commander in good standing.

_____ _____
Name of Commander (Please type) School Name

_____
Mailing Address

_____

_____

_____ _____
Signature of Commander Date

THIS FORM MAY BE REPRODUCED

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Private Security Training Curriculum
Effective 01/01/2014

Please check topics qualified to teach.

1. ADMINISTRATION

1. _____Orientation (Commander Only)
2. _____Role of Private Security
3. _____Ethics & Professionalism

2. LEGAL

1. _____Overview of the Legal System
2. _____*Intentionally Left Blank*
3. _____Liability
4. _____Legal Authority
5. _____*Intentionally Left Blank*
6. _____Evidence
7. _____Testifying

3. HUMAN RELATIONS

1. _____Public Relations
2. _____Crisis Intervention
3. _____Drug Awareness
4. _____*Intentionally Left Blank*
5. _____Juveniles
6. _____*Intentionally Left Blank*
7. _____Community Diversity

4. COMMUNICATIONS

1. _____Field Note Taking
2. _____Report Writing
3. _____Interviews
4. _____Communication Systems
5. _____ Interpersonal Communications

5. LOSS PREVENTION

1. _____Observation & Description
2. _____Physical Security
3. _____Information Security
4. _____Retail Security
5. _____Personnel Security
6. _____Internal Theft
7. _____Crime Prevention

6. SAFETY & PROTECTIVE SERVICES

1. _____Fire Safety
2. _____Occupational Safety
3. _____Patrol Techniques
4. _____Crowd Control

7. SUBJECT CONTROL TECHNIQUES*

1. _____Subject Control Techniques

8. FIRST AID/CPR/AED

1. _____First Aid/CPR/AED

9. FIREARMS*

1. _____Revolver
2. _____Semi-Auto
3. _____Shotgun

10. HOMELAND SECURITY

1. _____Terrorism Awareness
2. _____Incident Command System
3. _____National Incident Management System

***ONLY UNIT INSTRUCTOR APPLICANTS MAY REQUEST UNIT 7 AND UNIT 9**