



AUTHORIZATION FOR CORRECTION OFFICER TO ATTEND TRAINING

**For Topics 2-7 Sexual Harassment and Abuse in Corrections and
 4-3 Crisis Intervention Skills and Handling the Special Needs Inmate**

This is to authorize that _____ is a correction
 Name
 officer at _____
 Full Service Facility

_____ 1. S/he has had an interruption in service of less than one year as indicated below. S/he is authorized to take the indicated topics (above) for update purposes. Our records indicate s/he took the Corrections Basic Training in School number _____ at _____
 Name of School

Dates of Assignment _____ Facility _____
 (Beginning/End)

Dates of Assignment _____ Facility _____
 (Beginning/End)

_____ 2. S/he is authorized to take this training pre-emptively.

I understand this training cannot be applied toward any Continued Professional Training credit nor as credit toward the Basic Corrections Officer Training should it be required for this individual in the future.

 Typed Title/Name of Requesting Official

 Signature

 Full Service Facility

 Date