

Ohio Peace Officer Training Academy

Firearms Instructor Training Remediation Form

Instructor Name:
Date Deficiency Observed:
Student Name:
Student Signature:
Time & date student was notified:
Explanation of Student's Deficiency (including specific details and examples):
Remedial Training (Explain what training was provided and when):
Deviauring Instructor Name:
Reviewing Instructor Name: Date of Review:
Date of neview.
Summarize the training issue and whether sufficient progress has been made:
Summanze the training issue and whether sumclent progress has been made.
Determination (Based on the above findings, make the following decision:
The above student is to continue with the course.
The above student is to be removed from the instructor course.
Instructor Signatures:
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