Student Evaluation Record*

Curriculum Code: BAS046

School Name: _____ **School #:** _____ **Dates:** _____ to _____

Student Name (Last, First, M.I.)	DOB	**Active Shooter / Threat Response**	**Building Searches**	**CIFA**	**Driving**	**Firearms**	**HazMat & WMD**	**Impact Weapons**	**Notebook**	**Patrol Aspects**	**Physical Fitness**	**SFST**	**Stops & Approaches**	**Subject Control**	**Withdrawn (X)**	**Ext. (Med/Mil)**	**Ext. Comp. (Y/N)**	**Mand. Attend. Comp. (Y/D)**	**Exam Eligible (Y/N)**	SCE Score **Initial**	SCE Score **Retest**
																		X			

School Commander Signature/Administrator Signature

Date

SF155bas
Effective 01.01.2027

***Mark Failed Skills with an X**