Equivalency of Training Candidate Packet



The Assessment Center Miami Dade College School of Justice, Public Safety and Law Studies 11380 NW 27th Avenue Suite 8324 Miami, FL 33167 305.237.1476 O 305.237.1807 F nac@mdc.edu

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Purpose:

3.

The purpose of the Equivalency of Training (EOT) Program is to obtain certification as an officer in Florida without first attending (or re-attending) a full basic recruit academy in the State of Florida.

Eligibility for EOT Assessment:

- Successfully completed basic recruit training comparable in content to the Basic Recruit Training Program for the discipline for which the individual claims exemption or a previously completed Commission-approved Basic Recruit training Program; and,
- Law enforcement, correctional or correctional probation officers from another state, a federal agency, or the military who are either active or have less than an eight-year break in service or a former Florida law enforcement, correctional, or correctional probation officer with more than a four-year break in service, but less than an eight-year break in service.

Miami Dade College EOT Program Eligibility Steps: (You must complete each step before progressing to the next.)

- 1. Successfully complete a background review and receive a 76 form from a selection Center or an agency in Florida.
- 2. Demonstrate proficiency in the following high-liability physical skills at the Miami Dade College, School of Justice:
 - Defensive Tactics, Firearms, First Aid (all disciplines)
 - Vehicle Operations (law enforcement only)
 - Complete Commission-approved training in recognition of and response to head trauma and brain injury in a child under 6 years of age; sexual assault investigations; and elder abuse investigations.
 - Pass the Florida State Officer Certification Examination (SOCE).

Steps 2 and 3 MUST BE DONE all in one (1) year from the date you receive Form 76.

EOT PROGRAM QUALIFICATION

To determine if you qualify, your training and employment history must be evaluated by MDC, selection center personnel. In order for us to evaluate your training and employment, you must:

- Pay the designated EOT application fee. If employment was in the state of FL it is \$50. If employment is out of State of FL or Federal/Military it is \$250.
- Submit an EOT application providing us with requested information
- Provide backup documentation of employment and training.
- Execute a waiver authorizing us to make inquiries

If you qualify:

We will send you a Criminal Justice Standards and Training Commission (CJSTC) Form 76, for which you must show your eligibility to proceed with the Proficiency Demonstration and the SOCE. To allow enough time for the evaluation, submit your application well in advance of the date you intend to take the SOCE. We recommend you allow 4 to 6 weeks for the assessment step. *All information provided by applicants is subject to independent verification*.

Send all mail to: The Assessment Center Miami Dade College, North Campus School of Justice, Public Safety and Law Studies 11380 N.W. 27th Avenue, Room 8324 Miami, FL 33167 305.237.1476 O 305.237.1807 F

HOW TO APPLY TO THE MIAMI DADE COLLEGE EOT PROGRAM

To apply for the EOT Program at the Miami Dade College, School of Justice, you must do the following:

1. Complete and have notarized the Equivalency of Training (EOT) Application. Your former (or present) criminal justice employer will be contacted. Your employment records must establish that your prior service as a full-time sworn officer in another state or the Federal Government for at least one year, in the criminal justice discipline for which the individual is requesting an exemption. There shall be no more than an 8-year break in employment, which is measured from the separation date of the most recent qualifying employment to the time a complete application is submitted for an exemption under this rule section. The twelve months sworn experience shall have occurred at no more than two criminal justice agencies over a period not to exceed eighteen months as a full-time sworn officer in the discipline for which an exemption is being requested.

Prior service as a special operations forces member for a minimum of five years with no more than a four-year break in service which is measured from the separation date of the most recent qualifying special operations forces service to the time a complete application is submitted for an exemption under this rule section.

NOTE: "Qualifying employment **cannot** include time spent in an academy, even if you were receiving pay while attending the academy. Positions that are seasonal, part-time, reserve (civilian or military), volunteer, military security forces, military vessel-boarding teams, etc., typically do not qualify for the EOT Program.

2. Complete the Authorization for Release of Information From (CJSTC Form 58) and submit as part of your application. This waiver must also be notarized.

3. Provide documentation of employment qualifications (payroll records, employment records, verification of employment letters/affidavits) and training documentation (Authentic copies of one or more of the

- a. training records from prior employers
- b. training records from academies
- c. transcripts
- d. curricula summaries
- e. certificates of completion
- f. verification of training /letters affidavits
- g. course outlines and certificate of completions showing that you completed training in all the required subjects. This training may be from your employer, an accredited college, or a certified state, local, or federal training academy.
- Applicant's law enforcement training is comparable to the Commission's Florida Law Enforcement Academy for which the exemption is requested, and at a minimum reflects successful completion of training for the topics of Legal, Interactions in a Diverse Community, Interviewing and Reporting Writing, Patrol (including Fundamentals, Calls for Service, and Critical Incidents), Criminal Investigations (including Crime Scene and Courtroom), Traffic Stops, Traffic Crash Investigations, Vehicle Operations, First Aid or equivalent, Firearms, and Defensive Tactics.
- Applicant's correctional officer training is comparable to the Commission's Florida Correctional Basic Recruit Training Program whenever an exemption is requested, and at a minimum reflects successful completion of training for the topics of Legal, Communications, Officer Safety, Facility and Equipment, Intake and release, Supervising in a Correctional Facility, Supervising Special Populations, Responding to Incidents and emergencies, Firearms, Defensive Tactics, and First Aid or Equivalent
- 4. Pay the application fee. If employment was in the state of FL it is \$50. If employment is out of State of FL or Federal/Military it is \$250.Out-of-state certified officers, federal officers, or military)

All payments may be made either in person at the Miami Dade College, North Campus Bursar's office, OR by enclosing payment with the mailed in application.

If you are mailing in your application, please enclose a cashier's check or money order, made payable to Miami Dade College, for the applicable application fee listed above.

If submitted your application by mail, please send your packet to:

The Assessment Center Miami Dade College, North Campus 11380 NW 27th Avenue, Suite 8324 Miami, FL 33167

If you would like to submit your application in person, please visit us at the address listed above. Our office hours are Monday – Thursday, 8:30 AM to 5:00 PM; Friday 8:00 AM to 4:30 PM. We are located on the 3rd floor in Building 8.

Once you have been accepted into the program and received your Form 76, you will then have **one (1) year from the date you receive that form** to do your demonstration of proficiency in high liability subjects and for the law enforcement discipline, complete Commission-approved training in recognition of and response to head trauma and brain injury in a child under 6 years of age; sexual assault investigations; and elder abuse investigations **and pass the State Officer Exam. This must be done all in one (1) year from the date you receive Form 76.**

If you fail to complete these requirements within the one (1) year, you may apply for another exemption from training, but you must be eligible pursuant to Chapter 943.131(2), F.S. at the time of application. You may be required to complete the full basic training academy to become certified, or in the case of former Florida officers, to become re-certified.

Criminal Justice Selection Center Equivalency of Training Application

DO NOT E-MAIL THIS FORM! You may fill the form out on-line but must print it & mail or carry it to our offices.

I am seeking Equivalency of Training for (check one		aw Enforcement	Corrections		orrections I fficer	Probation	Plar COLLEGE NORTH
Please read the accompar "Authority For Release of		•	•	• •			Form CJSTC 58
SSN		N is required by FDLE. T SEND THIS FORM VIA I	-MAIL!!	Check if you have app anywhere else in Flor		Where?	
Last Name			First Nam	e		Middle	
Street Address						Apt. #	ł
City			State		Zip Code		
Race	Sex		D.O.B. mm/dd/yyy	'Y			quired by FDLE. S FORM VIA E-MAIL!!
Phone Number		Educati	on			Veteran	
E-mail			Origina	al Certification			

My qualifying full-time employment as a law enforcement or corrections officer, which ended no more than 8-years prior to this application, was at the following agency:

Full AgencyName:		Your Position/Title:	
Street Address		Attention (Person or Unit):	
City	State	Zip Code	
Phone Number	Employed from:	Until:	Still Employed
If a second employer must be used to e eighteen-month period, please compl		ve one-year of full-time employm	ent within an
Full Agency Name:		Your Position/Title:	
Street Address		Attention (Person or Unit):	
City	State	Zip Code	
Phone Number	Employed from:	Until:	

The basic training that establishes my qualifications for this application may be verified at the following institution(s):

Full name of Institution		
Street Address		Attention (Person or Unit):
City	State	Zip Code
Phone Number	FAX Number	
Your Class #	Attended from:	Until:
Second institution, if applicable:		
Full name of Institution		
Street Address		Attention (Person or Unit):
City	State	Zip Code
Phone Number	FAX Number	
Your Class #	Attended from:	Until:

APPLICANT'S SIGNATURE and ACKNOWLEDGEMENTS

I, the undersigned, hereby swear or affirm the following:

- (1) All the information I have provided in this application is true and correct.
- (2) I am claiming eligibility for the Equivalency Of Training path to certification as a law enforcement or corrections officer in Florida because I meet all the basic training and full-time employment requirements.
- (3) I understand that an investigator will verify the information in this application and that any omission or falsification of a material fact will result in rejection of this application, and may prevent my future certification or employment as a law enforcement or corrections officer in Florida.
- (4) I understand that there are other legal requirements in Florida Statutes, and the rules established by the Florida Criminal Justice Standards and Training Commission (CJSTC), related to proficiency demonstration, examination, citizenship, high school education, criminal history, character of military discharge, and moral character, etc., which must be established in a full background investigation by a hiring agency prior to my certification or employment as a law enforcement or corrections officer in Florida.
- (5) Travel arrangements shall not be made until official notification from the School of Justice has been received by the Director of the School of Justice.

Signature of Applica	int	
		AFFIDAVIT
State of	County of	
	ared vith full knowledge of the pur	
Sworn to and subscribed be	efore me thisday of	, 20 My commission expires on, 20, 20,
Personally KnownOR-	Produced the following iden	tification:



Law Enforcement

AUTHORITY FOR RELEASE OF INFORMATION (Background Investigation Waiver)



CJSTC

58

Incorporated by Reference in Rule 11B-27.0022(2)(a), F.A.C.

To: Concerned Person or Authorized Representative of Any Organization, Institution or Repository of Records

APPLICANT'S NAME:

DATE OF BIRTH:

LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER:

AGENCY REQUESTING BACKGROUND INFORMATION: Miami Dade College Criminal Justice Selection Center

ADDRESS: 11380 N.W. 27 Avenue, Room 8324, Miami, FL 33167

Having made application for certification or employment as a law enforcement, correctional, or correctional probation officer within the state of Florida, I hereby authorize for one year, from the date of execution hereof, any authorized representative of a Florida criminal justice agency or a Regional Criminal Justice Selection Center bearing this release to obtain any information pertaining to my employment, credit history, education, residence, academic achievement, personal information, work performance, background investigations, polygraph examinations, any and all internal affairs investigations or disciplinary records, including any files that are deemed to be confidential and/or sealed.

I also authorize release of any criminal justice records of arrests, citations, detentions, probation and parole records, or any police reports or other police records in which I may be named for any reason, including any files that are deemed to be juvenile and confidential. I hereby direct you to release this information upon the request of the bearer, whether in person or by correspondence. I further authorize the bearer to make copies of these records.

This release is executed with the full knowledge and understanding that these records and information are for the official use of a Florida criminal justice agency or Regional Criminal Justice Selection Center in fulfilling official responsibilities, which may include sharing the records or information with other criminal justice agencies, Regional Criminal Justice Selection Centers or the State of Florida or release to third parties as may be required by Florida public records laws. I hereby release you, as the custodian of such records, and employer, educational institution, physician, hospital or other repository of medical records, credit bureau or consumer reporting agency, including its officers, employees, and related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. A copy of this form will be as effective as the original.

I hereby authorize the National Records Center, St. Louis, Missouri, or other custodian of my military record to release information or copies from my military personnel and related medical records, including a copy of my DD 214, Report of Separation, or other official documents from the United States Military denoting discharge status or current active military status to:

Miami Dade College Criminal Justice Selection Center 11380 N.W. 27th Avenue, Miami, FL 33167

Section 768.095, F.S., titled Employer Immunity from Liability; disclosure of information regarding former or current employees states: An employer who discloses information about a former or current employee to a prospective employer of the former or current employee upon request of the prospective employer or of the former or current employee, is immune from civil liability for such disclosure of its consequences, unless it is shown by clear and convincing evidence that the information disclosed by the former or current employee protected under chapter 760, Florida Statutes. *Pursuant to Sections 943.134(2)(a) and (4), F.S., Chapter 2001-94, Laws of Florida, disclosure of information is required unless contrary to state or federal law. Civil penalties may be available for refusal to disclose non-privileged legally obtainable information.*

Applicant's Signature	Date
Applicant's Address	
OATH	
Pursuant to Section 117.05(13)(a), I	Florida Statutes
STATE OFCOUNTY OF	
Sworn to (or affirmed) and subscribed before me this	
day of, year, By	
Signature of Notary Public – State of Florida	
Print, Type, or Stamp Commissioned name of Notary Public	
Personally Known OR Produced Identification	
Type of Identification Produced	

Effective: 8/9/2001 Pursuant to Sections 943.134(2)(a) and (4), F.S.



THE ASSESSMENT CENTER Miami Dade College School of Justice, Public Safety, and Law Studies (305) 237-1476 nac@mdc.edu



Instructions

- Turn completed form into the BURSAR' S OFFICE.
 - o Location: North Campus, Building 1, Room 1154
 - Telephone: (305) 237-9310
 - o Hours: Mon-Thurs 8:00 A.M.-7:00 P.M.; Fri 8:00 A.M.-4:30 P.M.
- Attach a copy of the receipt of payment to your EOT application.

Name: —	
Date: —	(mm/dd/yyyy)
Last Four Digits of SSN: —	
Payment Type: — (Please check one) —	EOT Application – In State (\$50.00) EOT Application – Out of State w/approved CJSTC 76 form (\$50.00)* EOT Application – Out of State (250.00)
I,	, understand the following:

- The Equivalency of Training (EOT) Application fee **must** be paid prior to the submission of the completed Equivalency of Training (EOT) Application and subsequent documents.
- Payment receipt must be attached to EOT at time of application submission.
- Payment may be made in cash, credit card or money order.
- All fees are *non-refundable and non-transferable*.

Candidate Signature: _____

Bursar's Authorization to Collect Fee for EOT APPLICATION

ASSESSMENT CENTER						
QUAL OPERATING FUND UNIT CODE ICS DEPT ID CAMPUS CENTER GL COD				GL CODE		
N31201	NH01	301	4A22001	350090	1000	40920

Payment Receipt #: _____ Cashier:_____

For questions, contact The Assessment Center 305-237-1476 or nac@mdc.edu

* Out-of-state candidates who have an approved CJSTC 76 form from another Selection Center, are only required to pay a \$50.00 processing fee. If the CJSTC 76 form <u>cannot</u> be verified, an additional \$200.00 fee will be assessed before acceptance into the program.