

2016 JAILER TRAINING DOCUMENTATION LOG

Department approval is needed before training begins. Complete and fax this form to the Jail Inspection Division at (405) 271-5304 for your approval notification.

Name of Jail: _____ City: _____ Zip: _____

Telephone: _____ Fax: _____

Person to Contact Regarding Jailer Training: _____ Name of Student: _____

SUBJECT	DATE OF TRAINING	HOURS	STUDENT INITIALS	PLACE OF TRAINING	PRESENTER'S NAME AND TITLE
Security Procedures					
Supervision of Prisoners					
Report Writing & Documentation					
Prisoner Rules & Regulations					
Grievance & Disciplinary Procedures					
Rights & Responsibilities of Inmates					
Emergency Procedures					
First Aid & CPR					
OK Jail Standards: Chapter 670 (must be completed by facility before testing)					
LIST OTHER TRAINING					

I CERTIFY THE STUDENT NAMED ABOVE HAS COMPLETED THE REQUIRED MINIMUM TRAINING FOR CALENDAR YEAR 2016.

Training Officer/Sheriff/Chief

