**NON-COMPLIANCE FOLLOW-UP REPORT**

Incorporated by Reference in Rule 11B-21.019(4), F.A.C.

<table>
<thead>
<tr>
<th>TRAINING SCHOOL</th>
<th>REGION</th>
<th>FIELD SPECIALIST</th>
<th>TIME and DATE</th>
</tr>
</thead>
</table>

**Date of original non-compliance:**

**Area of non-compliance:**

**Corrective Action:**

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**In Compliance** ☐  **Not In Compliance** ☐  **Corrected on site by the Field Specialist** ☐

**Rule Violation:** ____________________________, F.A.C.

**Field Specialist’s Signature:** ____________________________  **Date:** __________

**Training Center Director or Coordinator or Instructor Signature:** ____________________________  **Date:** __________

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