



EQUIVALENCY-OF-TRAINING

Florida Department of Law Enforcement

Incorporated by Reference in Rules 11B-27.002(3)(a)11., 11B-30.006(2)(b), and 11B-35.009(5), F.A.C.



CJSTC 76

Type or print in black or blue ink and use capital and small letters to write names, addresses, and titles

OFFICIAL CJSTC USE ONLY:

Exemption Granted: _____ Denial: _____ Processing Date: _____ Signature: _____

1. Applicant's Name: _____ Last _____ First _____ MI _____

2. Applicant's Home Address: _____ City: _____ State: _____ Zip Code: _____

3. Social Security Number: _____ 4. Applicant's Home Telephone: _____

5. Agency or Selection Center: _____ 6. Agency ORI: FL _____

7. Agency or Selection Center Mailing Address: _____

City: _____ State: _____ Zip Code: _____

8. Telephone number: _____ Ext. _____ Contact Person: _____

9. Enter "X" by type of certification that applicant is seeking. If seeking certification in more than one discipline, complete a form for each discipline.

Law Enforcement Correctional Correctional Probation

10. Does the applicant have one year of full-time sworn criminal justice work experience in the discipline as marked item 9? Yes No

11. Enter "X" to indicate the officer's status: Inactive Florida Officer Out-of-State Officer Federal Officer

12. Prior Criminal Justice Employment(s)

Agency Name: _____ Position Title: _____

Agency Address: _____ Starting Date: _____ Ending Date: _____

Agency Telephone Number: _____

Agency Name: _____ Position Title: _____

Agency Address: _____ Starting Date: _____ Ending Date: _____

Agency Telephone Number: _____

NOTE: Ending date of last employment shall have been within eight years prior to the date this form is completed.

13. After reviewing the applicant's out-of-state or federal officer training record, check the topic area(s) that were successfully completed in the discipline for which the applicant is seeking certification. In addition to basic recruit training, the applicant may claim in-service or continuing officer training courses that were successfully completed. NOTE: If all blocks are not checked, the applicant is required to complete a Basic Recruit Training Program.

Table with 3 columns: Florida CMS Law Enforcement Comparable Training Pursuant to 11B-35.009(3), F.A.C.; Correctional Comparable Training Pursuant to 11B-35.009(3), F.A.C.; Florida Correctional Probation Comparable Training Pursuant to 11B-35.009(3), F.A.C. Each column lists various training topics with checkboxes.

I hereby acknowledge that the above information is true and was verified by me upon examination of supporting documentation on file at the employing agency's selection center. I also acknowledge that the documentation is subject to verification by the Criminal Justice Standards and Training Commission.

14. Agency Administrator or Selection Center Director's Signature _____

15. Date Signed _____

INSTRUCTIONS FOR COMPLETING FORM CJSTC-76

- Use this form to request an exemption from basic recruit training for an out-of-state, federal officer, or inactive Florida officer who has not been employed in four to eight years.
- Complete this form and submit to the Criminal Justice Standards and Training Commission (CJSTC) for determination on whether previous criminal justice training and experience qualifies the applicant for an exemption.
- If the exemption is granted, the applicant shall demonstrate proficiency in the high-liability required proficiency skills, and pass the State Officer Certification Examination (SOCE). Inactive Florida officers are required to complete only sections 1 – 11 of this form.

HOW TO COMPLETE THIS FORM.

1. **Applicant's Name.** Enter the applicant's legal name, last and first name, and middle initial.
2. **Applicant's Home Address.** Enter the applicant's home address, city, and state of residence. Applications missing the applicant's home address will be returned as incomplete.
3. **Social Security Number.** Enter the applicant's nine-digit social security number as in this example: 000-00-0000.
4. **Applicant's Home Telephone Number.** Enter the applicant's ten-digit home telephone number.
5. **Agency or Selection Center Name.** Enter the applicant's agency or assessment center's name.
6. **Agency ORI.** Enter the last seven digits of the applicant's agency originating identifier number. There are nine digits in the agency ORI codes. The first two have been entered, which are FL. Enter as in this example. FL0370000.
7. **Agency or Selection Center Mailing Address.** Enter the street number and name and enter the suite number after the street name. **City.** Enter the name of the city. **State.** Enter the two-digit U.S. Postmaster's abbreviation of state as in this example: FL for Florida. **Zip code.** Enter the nine-digit zip code for the addresser as in this example: 32314-6554
8. **Agency or Selection Center Telephone Number.** Enter the applicant's ten-digit agency telephone number as in this example: (000) 000-0000.
9. **Type Of Certification.** Enter X in the box for the certification requested.
10. Check either X in the Yes or No box. One of the boxes **must be checked**.
 - An applicant may satisfy one year of experience even if he or she worked full-time for more than one agency or had a break-in-service. **However, an applicant with full-time experience of one year shall have accumulated it with no more than two agencies within an 18-month consecutive period.**
 - There shall be no more than an eight-year break in employment, which is measured from the separation date of the most recent qualifying employment to the time a completed application is submitted for equivalency-of-training.
 - Only "full-time officer employment" may be credited. Full-time employment means a normal workweek of 40 hours. An officer employed full-time, who is on leave or on an approved leave of absence, may be included provided the applicant has remained employed in a full-time officer status.
11. Enter an "X" on the line that indicates whether the officer is an inactive Florida officer, out-of-state officer, or federal officer.
12. Enter the name, address, telephone number, position title, starting and ending date of the out-of-state or federal officer's work experience. An applicant may claim full-time officer employment from any criminal justice agency in any state, the U.S. territory, and any Federal agency that employs sworn personnel, including the Armed Forces or a Native American Indian tribe, or from any combination of these.
13. **Out-Of-State and Federal Officers Only.** Please check the comparable training blocks applicable to the certification the applicant is seeking. Example: If the applicant is seeking certification in law enforcement, the applicant must check the law enforcement comparable training.

An applicant may claim credit for successfully completing basic recruit training, and also for successfully completed in-service or other continuing training. The training may have been completed at a state, local, or Federal training academy or a criminal justice agency.

NOTE: If the applicant was employed out-of-state in one discipline and is seeking certification in another discipline in Florida, the applicant shall demonstrate proficiency in the high-liability areas in the discipline the applicant was employed in out-of-state. The applicant shall successfully pass the SOCE prior to becoming eligible for cross-training in another discipline.

Example: Mr. John Doe shall complete form CJSTC-76, successfully demonstrate proficiency in the high-liability areas, and pass the SOCE prior to completing a Commission-approved Traditional Basic Recruit Training Program for the discipline in which cross-over certification is being sought, pursuant to Rule 11B-35.0024, F.A.C.
14. **Agency Administrator or Selection Center Director's Signature.** The agency administrator, selection center director, or designee shall sign this form.
15. **Date Signed.** Enter the date the agency administrator, selection center director, or designee signed this form.

AGENCY REQUIREMENTS

- If the selection center or agency is entering the information on-line through the Commission's Automated Management Training System (ATMS), please print this form and maintain the original on file at the agency or selection center and submit a copy to the applicant.
- If the agency is not entering the information on-line through ATMS, maintain the original form on file at the agency and submit a completed copy of the form and a letter requesting FDLE to enter the data into ATMS. Submit the copies to: **Florida Department of Law Enforcement, Criminal Justice Professionalism Program, P.O. Box 1489, Tallahassee, Florida 32302-1489. Attention: Records Section. Fax Number: 850-410-8605**
- If the applicant has any questions, please contact the assigned Criminal Justice Standards and Training Service Specialist or Field Specialist.