**1. Training School Name:       2. Class Number:**

**3. Student’s Printed Name:       4. Student’s Identification Number:**

**5. Name of Course:** **[ ]  Breath Test Operator Course # 851** **[ ]  Breath Test Operator Renewal Course # 951**

**[ ]  Agency Inspector course # 850** **[ ]  Agency Inspector Renewal Course # 950**

 **[ ]  Breath Test Operator Course-Intoxilyzer 9000 # 852 [ ]  Breath Test Operator Renewal Course-Intoxilyzer 9000 # 952**

 **[ ]  Agency Inspector course-Intoxilyzer 9000 # 853 [ ]  Agency Inspector Renewal Course-Intoxilyzer 9000 # 953**

**6. Student Performance Requirements:**

* **Demonstration of Proficiency:** A student shall demonstrate the required proficiency skills at 100%, with the results recorded in the applicable section of this form. One retest is allowed.
* **Written End-of-Course Examination:** A student shall achieve a minimum score of no less than 80% on the written end-of-course examination. One retest is allowed pursuant to Rule 11B-35.001(14), F.A.C.
* A student who fails either the required demonstration of proficiency skills or the written end-of-course examination shall be deemed to have failed the applicable Breath Test Operator Course, Breath Test Operator Renewal Course Agency Inspector Course, or Agency Inspector Renewal Course.

**7. Proficiency Skills Evaluation:** Complete the section for the applicable course only. For each skill the student successfully completes, place a mark in the PASS column. For each skill the student does not successfully complete, place a mark in the FAIL column. The student shall PASS the demonstration of proficiency when all skills for the proficiency skills evaluation are marked PASS. The student shall FAIL the demonstration of proficiency if any section of the proficiency skills evaluation is marked FAIL.

 **Breath Test Operator Course (Number 851 or 852) or Breath Test Operator Renewal Course (Number 951 or 952):**

|  |  |  |  |
| --- | --- | --- | --- |
| **SKILL** | **PASS** | **FAIL** | **COMMENTS** |
| 1. Demonstrate the ability to explain messages received during a breath test.
 |  |  |  |
| 1. Demonstrate the ability to explain the corrective action to be taken when a message is received.
 |  |  |  |
| 1. Conduct a breath test in accordance with Chapter 11D-8, F.A.C.
 |  |  |  |
| 1. Review and complete the report associated with breath test, in accordance with Chapter 11D-8, F.A.C.
 |  |  |  |

 **Agency Inspector Course (Number 850 or 853) Or Agency Inspector Renewal Course (Number 950 or 953):**

|  |  |  |  |
| --- | --- | --- | --- |
| **SKILL** | **PASS** | **FAIL** | **COMMENTS** |
| 1. Demonstrate the ability to explain the scientific principle(s) of how the instrument operates.
 |  |  |  |
| 1. Demonstrate the ability to explain messages received during a breath test or inspection.
 |  |  |  |
| 1. Demonstrate the ability to explain the corrective action to be taken when a message is received.
 |  |  |  |
| 1. Conduct an agency Inspection in accordance with Chapter 11D-8, F.A.C.
 |  |  |  |
| 1. Review and complete the report associated with agency Inspection, in accordance with Chapter 11D-8, F.A.C.
 |  |  |  |
| 1. Conduct a breath test in accordance with Chapter 11D-8, F.A.C.
 |  |  |  |
| 1. Review and complete the report associated with breath test, in accordance with Chapter 11D-8, F.A.C.
 |  |  |  |

**8. Demonstration of Proficiency: Pass** [ ]  **or Fail** [ ]

**9. Written End-of-Course Examination: Pass** [ ]  **or Fail** [ ]

**10. Completion of Course Requirements – Overall Determination:**

**[ ]  The student has successfully completed the Course referenced in Number 5.**

**[ ]  The student has failed the Course referenced in Number 5.**

**11. Student’s Signature:**  **12. Date:**

**13. Course Instructor’s Printed Name: 14. Date:**

**I HEREBY CERTIFY THAT I HOLD A VALID BREATH TEST INSTRUCTOR CERTIFICATION, AND THAT THE INFORMATION PROVIDED HEREIN ACCURATELY REFLECTS THE PERFORMANCE OF THE ABOVE LISTED STUDENT.**

**15. Course Instructor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**