

SECTION **18**
Agency-Specific Activities

18.1 **COMPETENCY REQUIREMENTS**

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Note to Administrators

In order for POST to review and approve your agency's *Field Training Guide*, you **MUST** submit the following electronic files:

- 1) The POST FTP Approval Checklist ([Form 2-230](#))
- 2) Your department's *Policy & Procedure Manual*
- 3) Your completed Guide (Volumes 1 & 2), including ALL competency requirements covered in Part 5, Sections 1–18.

LIST OF SUBTOPICS

18.1 CAMPUS COMMUNITY WITHIN THE CSU SAN BERNARDINO SYSTEM

- 18.1.01 Activity: Title XI
- 18.1.02 Activity: CARE
- 18.1.03 Activity: President and Vice President's Office
- 18.1.04 Activity: San Manuel Student Union including Clubs within Student Union
- 18.1.05 Activity: ASI Office
- 18.1.06 Activity: Health Center

INSTRUCTIONS FOR SECTION 18 ONLY

(See additional instructions for Administrators and FTOs at end of file)

**PORTIONS OF THIS FILE ARE NOT PROTECTED.
USE CAUTION WHEN EDITING TO PREVENT ALTERING THE LAYOUT.**

Section 18 contains four “blank” tables. Fill in the agency-specific activities and descriptions for each subtopic entered. The space provided for descriptions will expand automatically.

To add new table(s):

The last page of this file contains an add-on table for additional activities.

1. Create blank space for the new table after the last activity entered (press RETURN at least twice).
2. Select the entire add-on table, *including* the blank line below the “Additional Information” boxes and choose copy.
3. Go to the desired location and paste the table within the blank space created.

To remove table(s):

Select the entire table, *including* the blank line below the “Additional Information” boxes, and press delete.

Useful links: The following links access California legislative codes and U.S.

SECTION 18 AGENCY-SPECIFIC ACTIVITIES

CHECK ONE ONLY: PHASE 1 PHASE 2 PHASE 3 PHASE 4 PHASE 5

Trainee

FTO

18.1 TYPES OF ACTIVITIES
 The trainee shall explain the necessity of, and demonstrate proficiency in, the performance of agency-specific activities to minimally include the following.

18.1.01 Activity: The Trainee will be shown the Title XI office and introduced to the personnel.

<i>Reference(s):</i>					<i>Case # (If applicable)</i>	<i>Incident #</i>		
	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
FTO:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
Trainee:								

Comments:

Additional Information:

18.1.01 Part A - Reference Agency Policies/Procedures, if applicable (600 characters maximum) N/A

18.1.01 Part B - Agency Training Details (field will expand automatically)

18.1.02 Activity: The Trainee will be shown the CARE offices.								
Reference(s):						Case # (if applicable)	Incident #	
FTO:	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
Trainee:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
Comments:								

Additional Information:

18.1.02 Part A - Reference Agency Policies/Procedures, if applicable (600 characters maximum)	<input type="checkbox"/> N/A
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18.1.02 Part B - Agency Training Details (field will expand automatically)

18.1.03 Activity: The Trainee will be shown the President and Vice President offices.								
<i>Reference(s):</i>						Case # (If applicable)	Incident #	
FTO:	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
Trainee:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
<i>Comments:</i>								

Additional Information:

18.1.03 Part A - Reference Agency Policies/Procedures, if applicable (600 characters maximum)	<input type="checkbox"/> N/A
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18.1.03 Part B - Agency Training Details (field will expand automatically)

18.1.04 Activity: The Trainee will be shown the San Manual Student Union, to include all of the clubs within								
Reference(s):						Case # (if applicable)	Incident #	
	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
FTO:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
Trainee:								
Comments:								

Additional Information:

18.1.04	Part A - Reference Agency Policies/Procedures, if applicable (600 characters maximum)	<input type="checkbox"/> N/A
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18.1.04	Part B - Agency Training Details (field will expand automatically)
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18.1.05 Activity: The Trainee will be shown the ASI office								
Reference(s):						Case # (if applicable)	Incident #	
	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
FTO:					<input type="checkbox"/> Field Perform			<input type="checkbox"/> Field Perform
					<input type="checkbox"/> Role Play			<input type="checkbox"/> Role Play
Trainee:					<input type="checkbox"/> Written Test			<input type="checkbox"/> Written Test
					<input type="checkbox"/> Verbal Test			<input type="checkbox"/> Verbal Test
Comments:								

Additional Information:

18.1.05	Part A - Reference Agency Policies/Procedures, if applicable (600 characters maximum)	<input type="checkbox"/> N/A
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18.1.05	Part B - Agency Training Details (field will expand automatically)
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18.1.06 Activity: The Trainee will be shown the Health Center								
<i>Reference(s):</i>						Case # (if applicable)	Incident #	
FTO:	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
Trainee:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
Comments:								

Additional Information:

18.1.06	Part A - Reference Agency Policies/Procedures, if applicable <i>(600 characters maximum)</i>	<input type="checkbox"/> N/A

18.1.06	Part B - Agency Training Details <i>(field will expand automatically)</i>

18.1.07 Activity:								
<i>Reference(s):</i>						Case # (if applicable)	Incident #	
FTO:	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
Trainee:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
<i>Comments:</i>								

Additional Information:

18.1.07	Part A - Reference Agency Policies/Procedures, if applicable <i>(600 characters maximum)</i>	<input type="checkbox"/> N/A

18.1.07	Part B - Agency Training Details <i>(field will expand automatically)</i>

18.1.08 Activity:								
<i>Reference(s):</i>						Case # (if applicable)	Incident #	
FTO:	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
Trainee:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
Comments:								

Additional Information:

18.1.08	Part A - Reference Agency Policies/Procedures, if applicable <i>(600 characters maximum)</i>	<input type="checkbox"/> N/A

18.1.08	Part B - Agency Training Details <i>(field will expand automatically)</i>

18.1.09 Activity:								
<i>Reference(s):</i>						Case # (if applicable)	Incident #	
	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
FTO:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
Trainee:								
Comments:								

Additional Information:

18.1.09	Part A - Reference Agency Policies/Procedures, if applicable <i>(600 characters maximum)</i>	<input type="checkbox"/> N/A
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18.1.09	Part B - Agency Training Details <i>(field will expand automatically)</i>
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18.1.10 Activity:								
<i>Reference(s):</i>						Case # (if applicable)	Incident #	
	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
FTO:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
Trainee:								
Comments:								

Additional Information:

18.1.10	Part A - Reference Agency Policies/Procedures, if applicable <i>(600 characters maximum)</i>	<input type="checkbox"/> N/A
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18.1.10	Part B - Agency Training Details <i>(field will expand automatically)</i>
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18.1.11 Activity:								
<i>Reference(s):</i>						Case # (if applicable)	Incident #	
FTO:	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
Trainee:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
Comments:								

Additional Information:

18.1.11	Part A - Reference Agency Policies/Procedures, if applicable <i>(600 characters maximum)</i>	<input type="checkbox"/> N/A

18.1.11	Part B - Agency Training Details <i>(field will expand automatically)</i>

18.1.12 Activity:								
<i>Reference(s):</i>						Case # (If applicable)	Incident #	
	Received Instruction		Competency Demonstrated		How Demonstrated?	Remedial Training		How Remediated?
	Signature	Date	Signature	Date		Signature	Date	
FTO:					<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test			<input type="checkbox"/> Field Perform <input type="checkbox"/> Role Play <input type="checkbox"/> Written Test <input type="checkbox"/> Verbal Test
Trainee:								
Comments:								

Additional Information:

18.1.12	Part A - Reference Agency Policies/Procedures, if applicable <i>(600 characters maximum)</i>	<input type="checkbox"/> N/A
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18.1.12	Part B - Agency Training Details <i>(field will expand automatically)</i>
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See next page for Attestation

How to Complete Part 5 (Sections 1–18)

INSTRUCTIONS TO ADMINISTRATORS

VOLUME 2 OF THE FIELD TRAINING GUIDE CONSISTS OF 18 SECTIONS WHICH MAKE UP PART 5. Each section is provided as a separate file on the POST website (<https://www.post.ca.gov/field-training--police-training.aspx>). Prior to submitting your FTP Guide to POST for review, you must complete all 18 sections and include them as part of your Guide.

1. **Set up:** Keep an unchanged copy of each section file as a master for reference. Make a copy of the file to use for your agency-specific entries.
2. **Front cover (optional):** To keep a hard copy of Volume 2 for internal use, you can add your agency name and date to the front cover.
3. **For each section (1–18):**
 - a. Open the applicable file and add your agency name and date to the header on page 1. (DO NOT change any other headers or footers or alter any other sections of the file.)
 - b. Below each table:
 - *Part A:* Enter applicable references from your agency’s Policies & Procedure Manual.
 - *Part B:* Enter your agency’s training details.
4. **After completing ALL sections (1–18),** you MUST submit the following materials via flash drive, CD, or DVD to POST for review and approval (do not send printed copies):
 - 1) **Your completed FTP Guide**
 - 2) **FTP Approval Checklist** ([POST Form 2-230](#))
NOTE: Guides submitted without this form will NOT be reviewed.
 - 3) **Your Department’s Policy & Procedure Manual**
5. MAIL YOUR ELECTRONIC MEDIA TO:
Commission on POST
860 Stillwater Road, Suite 100
West Sacramento, CA 95605
Attn: Basic Training Bureau (BTB)
6. You will receive status notification within 90 days from the date received.

See next page for Instructions to Field Training Officers

How to Complete Part 5 (Sections 1–18)

INSTRUCTIONS TO FIELD TRAINING OFFICERS (FTOs)

VOLUME 2 OF THE FIELD TRAINING GUIDE CONSISTS OF 18 SECTIONS WHICH MAKE UP PART 5. Each section has been customized by your agency administrator(s) to include references to policies and procedures and training details to meet your agency’s Field Training Program requirements. Each file is provided as a separate file. For each section (1–18), complete all tables for each topic.

1. **Set up:** Keep an unchanged copy of each section file as a master for reference. Make a copy of the file to use for your training sessions.
2. **Tracking your training sessions:**
 - a. Upon completing each competency, enter the FTO and trainee names and dates, and how the competency was demonstrated, into the applicable tables.
 - b. Enter any note-worthy comments related to the trainee’s performance.
3. **If trainee requires remedial training:**
 - c. Enter the FTO and trainee names and dates, and how the competency was remediated, to show that each competency was completed.
 - d. Enter any additional note-worthy comments related to the trainee’s performance.
4. **Attestation:** After all competencies have been performed, including any remedial training, the primary FTO and Trainee **MUST** enter their electronic signatures on the Attestation page (see instructions) to verify that the Trainee has completed this portion of the Field Training Program.

End Section