

GAVIN NEWSOM GOVERNOR

XAVIER BECERRA ATTORNEY GENERAL July 1, 2019

Nina Jamsen, Chief of Police CSU San Bernardino Police Department 5500 University Pkwy. San Bernardino, CA 92407

Dear Chief Jamsen,

Your request for POST approval to the CSU San Bernardino Police Department's Field Training Program has been approved effective this date. This approval is based upon your signed application for a POST-Approved Field Training Program (POST 2-229 form), the requirements established by POST Regulations 1004, 1005 and Procedure D-13, and the materials submitted in support of your program.

Approval extends to the Field Training Program with respect to POST regulations, while specific content of department policies and procedures remains exclusively the domain of your agency.

The Basic Training Bureau has retained the approved copy of your program for future compliance checks. Any changes or modifications to the approved program must be submitted using POST form 2-229, and approved by the Basic Training Bureau, prior to implementation.

We appreciate the efforts of your training personnel in providing the necessary documents. Thank you for assisting POST in its efforts to continually enhance the professionalism of California Law Enforcement.

If you have any field training related questions, please contact Senior Law Enforcement Consultant Glenn Glasgow at (916) 227-4661 (office), or by email at gglasgow@post.ca.gov.

Sincerely,

James F. Grottkau, Bureau Chief

Basic Training Bureau

JG: gg

State of California - Department of Justice POST-APPROVED FIELD TRAINING PROGRAM (FTP) OR POLICE TRAINING PROGRAM (PTP) APPLICATION

POST 2-229 (Rev 12/2012) - Page 1 of 2

Commission on Peace Officer Standards and Training (POST) 860 Stillwater Road, Suite 100 West Sacramento, CA 95605-1630 916 227-3909

Continues next page

INSTRUCTIONS

Go to: FTP/PTP Approval Checklist (Form 2-230)

- Complete this form to comply with requirements for POST's Field Training Program (FTP) or Police Training Program (PTP) per Regulations 1004, 1005, and Procedure D-13. All department heads MUST complete General Information and Sections A and B or C based upon the type of approval requested.
- Type or legibly print (in ink) all information required on the printed form. To access this form on our website, go to www.post.ca.gov.

9	d	Return the completed and signed application to POST at the above address. Approval notification will be sent to you within 45 working days from the date the completed application and applicable training program package are received.							
GE	NE	RAL INFORMATION							
Cali		ia State University San Bernardino Police Departmen		2. TRAINING PROGRAM (CHOOSE ONE) 7 FTP PTP					
Sco	tt De	OF FIELD TRAINING SUPERVISOR / ADMINISTRATOR / COORDINATOR (SA BANART	3. SAC EMAIL ADDRESS scott.denhart@csusb.edu						
Ser	gear			5. PHONE (909)537_7622 EXT					
PA	PART A. DEPARTMENT HEAD REQUEST FOR PROGRAM APPROVAL								
INS	TRI	JCTIONS: Check each applicable box to acknowledg Any omission may prevent or delay appro	ge compliance with the following <i>mini</i> aval of this request.	mum approval requirements.					
V	1.	The Training Program identified above shall be deliver structured learning content as specified in PAM, <u>Section</u>	ed over a minimum of 10 weeks (FTP) on D-13.	or 15 weeks (PTP) based upon the					
V	2.	2. A trainee shall have successfully completed the Regular Basic Course before participating in the Training Program.							
Z		The Training Program shall have a FTP or PTP Supervisor/Administrator/Coordinator (SAC) who meets the criteria contained in Regulation 1004(a)(3)(A–C) and 1004(c).							
V	4.	. The Training Program shall have Field Training Officers (FTOs) or Police Training Officers (PTOs) who meet the criteria contained in Regulation 1004(a)(4)(A–D) and 1004(d).							
1	5.	. Trainees shall be supervised depending upon their assignment:							
		 A trainee assigned to general law enforcement uniformed patrol duties shall be under the direct and immediate supervision (physical presence) of a qualified FTO or PTO, or 							
		 A trainee temporarily assigned to non-enforcement specialized functions(s) for the purpose of specialized training or orientation (e.g., complaint/dispatcher, records, jail, investigations) is not required to be in the immediate presence of a qualified FTO or PTO while performing the specialized function(s). 							
V	6.	Trainee performance shall be:							
		a. Documented daily through FTP Daily Observation Reports (DORs) or PTP journaling/daily training notes, and shall be reviewed with the trainee by the FTO or PTO, and							
		 Monitored by a FTP SAC or PTP SAC or FTP/PTP PTP weekly written summaries of performance (e.g reviewed with the trainee. 	designee who shall review and sign the ., Supervisor's Weekly Report, Coaching	FTP DORs or complete and sign and Training Reports) which are					
V	7.	Each FTO or PTO shall be evaluated by the trainee and FTP SAC or PTP SAC as described in Regulation 1004(a)(7)(A-B).							
abla	8.	Upon completing the program, trainees shall complete the program evaluation for FTP or PTP.							
Z		The FTO or PTO attestation for each trainee's competence and successful completion of the Training Program and a statement that releases the trainee from the program, along with the signed concurrence of the department head, or his/her designate, shall be retained in department records. Retention length shall be based upon department record policies.							
PART B. DEPARTMENT HEAD ATTESTATION AND SIGNATURE									
I attest that the above statements describing my department's Training Program are true and that this department will adhere to these described minimum requirements.									
PRIN		. Di	EPARTMENTIHEAD SIGNATUR E						
Nina Jamsen, Chief of Police			Nine Jana	6/20/19					

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POST 2-229 (Rev 12/2012) - Page 2 of 2

Go to: FTP/PTP Approva	I Checklist (Form 2-230)			
PART C. APPLICATION	FOR TRAINING PROGRAM EXEM	PTION POST Regulation 100	4(b)	
I attest that my depart	artment is exempt from the 🗌 FTP	/ PTP requirements because	e: (check one)	
1. The departme	ent does not provide general law enfo	rcement uniformed patrol service	es; or	
	ent only hires lateral entry officers pos lining Program, or (2) one year previo			
The above determin may be attached):	ation is based upon the following e	explanation and/or supporting	documentation (additional de	ocumentation
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PRINT NAME		DEPARTMENT HEAD SIGNATUR E	DATE	
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POST USE ONLY				
REVIEWED BY CONSULTANT	DATE APPROVE	ED BY BUREAU CHIEF	DATE APPROV	ED: YES NO
X. M.	m/ 17/1/19		NOTIFICATION SE	NT: YES NO