ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSA ACADEMY	SURVIVAL MINDSET	
Dates	**Location**	**Course Hours**
10.14.14	ASPC-KINGMAN	2

Instructor's Name *(Last, First M.I.)* [redacted]

	Participant's Name *(Last, First M.I.)* (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift Day	Shift Swing	Shift Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/HUALAPAI		X		
2	[redacted]	[redacted]	ASPC Ringman/Cerbat		X		
3	[redacted]	[redacted]	ASPC-K/Cerbat		X		
4	[redacted]	[redacted]	ASPC-K-Hualapai		X		
5	[redacted]	[redacted]	ASPC-K Cerbat		X		
6	[redacted]	[redacted]	ASPC-K Hualapai	X			
7	[redacted]	[redacted]	ASPC-K/Cerbat		X		
8	[redacted]	[redacted]	ASPC-K HUALAPAI		X		
9	[redacted]	[redacted]	ASPC-K - Cerbat		X		
10	[redacted]	[redacted]	A.S.P.C-K./Cerbat		X		
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Instructor's Signature	Training Officer's Signature

509-2
3/20/09

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSU ACADEMY	TACTICAL RESTRAINTS	
Dates	**Location**	**Course Hours**
10.14.14	ASPC-KINGMAN	4

Instructor's Name (Last, First M.I.) [redacted]

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/HUALAPAI		X		
2			ASPC-K/Cerbat		X		
3			ASPC-K/Cerbat		X		
4			ASPC-K-Hualapai		X		
5			ASPC-K Cerbat		X		
6			ASPC-K+/Hualapai		X		
7			ASPC-K HUALAPAI		X		
8			ASPC-K- Cerbat		X		
9			ASPC-K/Cerbat		X		
10			A.S.P.C.-F./Cerbat		X		
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Instructor's Signature [redacted]

Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSN ACADEMY	SEIF DEFENSE	
Dates	**Location**	**Course Hours**
10.14.14	ASPC-KINGMAN	8

Instructor's Name (Last, First M.I.) [redacted]

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]		ASPC-K/HUALAPAI				
2			ASPC-K/cerbot				
3			ASPC-K/Cerbat				
4			ASPC-K-Hualapai				
5			ASPC-K Cerbat				
6			ASPC-K HUALAPAI				
7			ASPC-K Hualapai				
8			ASPC-K- CerLat				
9			ASPC-K/Cerbrat				
10			A.S.P.C.-K./Kerbat				
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Instructor's Signature [redacted]

Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSA - ACADEMY	Hostage Recovery	
Dates	Location	Course Hours
	ASPC-KINGMAN	
Instructor's Name (Last, First M.I.)	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift			Date Completed
				Day	Swing	Grave Yard	
1	[redacted]		ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K/Hualapai				
5			ASPC-K/Cerbat				
6			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSU ACADEMY	Hand signals	
Dates	Location	Course Hours
	ASPC-KINGMAN	
Instructor's Name (Last, First M.I.)	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	*Shift Day	Swing	Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC K/Cerbat				
4			ASPC-K/Hualapai				
5			Aspc-K/Cerbat				
6			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSA ACADEMY	Building Entries	
Dates	**Location**	**Course Hours**
	ASPC-KINGMAN	
Instructor's Name *(Last, First M.I.)*	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K/Hualapai				
5			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSK ACADEMY	FIELD EXERCISES	
Dates: 10.19.14	Location: ASPC-KINGMAN	Course Hours:
Instructor's Name (Last, First M.I.): [redacted]		

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	* Shift: Day	Swing	Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K/Hualapai				
5			ASPC-K/Cerbat				
6			ASPC-K/Cerbat				
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Instructor's Signature

Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSA ACADEMY	CHEMICAL AGENTS	
Dates	**Location**	**Course Hours**
12-19-14	ASPC-KINGMAN	
Instructor's Name (Last, First M.I.)	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	* Shift Day	Swing	Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K/Hualapai				
5			ASPC-K/Cerbat				
6			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSU ACADEMY	TACTICAL SHOT GUN	
Dates	**Location**	**Course Hours**
9-19-18	ASPC-KINGMAN	
Instructor's Name *(Last, First M.I.)*	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	* Shift Day	Swing	Grave Yard	Date Completed
1	[redacted]		ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC K/Cerbat				
4			ASPC-K/Hualapai				
5			ASPC-K/Cerbat				
6			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
JSA ACADEMY	M-4	
Dates	**Location**	**Course Hours**
10-19-14	ASPC-KINGMAN	
Instructor's Name *(Last, First M.I.)*	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K/Hualapai				
5			ASPC-K/Cerbat				
6			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSU ACADEMY	TACTICAL PISTOL	
Dates	**Location**	**Course Hours**
10-19-19	ASPC-KINGMAN	
Instructor's Name *(Last, First M.I.)*	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]		ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC K/Cerbat				
4			ASPC-K/Hualapai				
5			ASPC-K/Cerbat				
6			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSA ACADEMY	TEMS	
Dates	Location	Course Hours
	ASPC-KINGMAN	
Instructor's Name (Last, First M.I.)	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	* Shift			Date Completed
				Day	Swing	Grave Yard	
1	[redacted]	[redacted]	ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K/Hualapai				
5			ASPC-K/Cerbat				
6			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSA ACADEMY	Crime Scene Preservation	
Dates	Location	Course Hours
	ASPC-KINGMAN	
Instructor's Name (Last, First M.I.)	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift			Date Completed
				Day	Swing	Grave Yard	
1	[redacted]		ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K/Hualapai				
5			ASPC-K/Cerbat				
6			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSA ACADEMY	CROWD CONTROL	
Dates	**Location**	**Course Hours**
10-15-18	ASPC-KINGMAN	4
Instructor's Name *(Last, First M.I.)*	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	* *Shift Day	Swing	Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-IC/HUALAPAI				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K/Hualapai				
5			ASPC-K/Cerbat				
6			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSU ACADEMY	ICS / DPLAF	
Dates	**Location**	**Course Hours**
10/15/15	ASPC-KINGMAN	3
Instructor's Name *(Last, First M.I.)*	[redacted]	

	Participant's Name *(Last, First M.I.)* (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift Day	Shift Swing	Shift Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K Cerbat				
2			ASPC-K Cerbat				
3			ASPC-K / Hualapai				
4			ASPC-K / Cerbat				
5			ASPC K / Hualapai				
6			ASPCK / Cerbat				
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Instructor's Signature	Training Officer's Signature

509-2
3/20/09

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSU Academy	Vehicle Assaults	
Dates	**Location**	**Course Hours**
10-15-14	ASPC-KINGMAN	7
Instructor's Name *(Last, First M.I.)*	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/HUALAPAI				
2			ASPC-K/CERBAT				
3			ASPC-K Cerbat				
4			ASPC-K/Cerbat				
5			ASPC-K/HUALAPAI				
6			ASPC-K CERBAT				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSN ACADEMY	SELF DEFENSE	
Dates	**Location**	**Course Hours**
10.14.14	ASPC-KINGMAN	8
Instructor's Name *(Last, First M.I.)*	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/Hualapai				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K-Hualapai				
5			ASPC-K Cerbat				
6			ASPC-K Hualapai				
7			ASPC-K Hualapai				
8			ASPC-K-Cerbat				
9			ASPC-K/Cerbat				
10			A.S.P.C.-K./Cerbat				
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Instructor's Signature	Training Officer's Signature
[redacted]	

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSL ACADEMY	TACTICAL RESTRAINTS	
Dates	**Location**	**Course Hours**
10.14.14	ASPC-KINGMAN	4

Instructor's Name *(Last, First M.I.)* [redacted]

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/HUALAPAI				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K-Hualapai				
5			ASPC-K Cerbat				
6			ASPC-K-H/Hualapai				
7			ASPC-K HUALAPAI				
8			ASPC-K-Cerbat				
9			ASPC-K/Cerbat				
10			A.S.P.C.-K./Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
JSA ACADEMY	SURVIVAL MINDSET	
Dates	**Location**	**Course Hours**
10.14.14	ASPC-KINGMAN	2
Instructor's Name *(Last, First M.I.)*	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/HUALAPAI				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			ASPC-K-Hualapai				
5			ASPC-K Cerbat				
6			ASPC-K Hualapai				
7			ASPC-K/Cerbat				
8			ASPC-K HUALAPAI				
9			ASPC-K - Cerbat				
10			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature

ARIZONA DEPARTMENT OF CORRECTIONS

Training Roster

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSA ACADEMY	FORMATIONS	
Dates	**Location**	**Course Hours**
10-13-14	ASPC-KINGMAN	7
Instructor's Name (Last, First M.I.)	[redacted]	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/HUACHUCA				
2			ASPC-K/Cerbat				
3			ASPC-K/Cerbat				
4			A.S.P.C-K/Cerbat				
5			ASPC-K-Huachuca				
6			ASPC-K Cerbat				
7			ASPC K Huachuca				
8			ASPC-K-Cerbat				
9			ASPC-K HUACHUCA				
10			ASPC-K/Cerbat				
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Instructor's Signature	Training Officer's Signature
[redacted]	[redacted]

ARIZONA DEPARTMENT OF CORRECTIONS

Training Rosfer

PLEASE PRINT ALL INFORMATION - Submit Original roster to Staff/Development Training Bureau - Shaded area is for briefing use only.

Course and Section Code	Course Title	
TSH ACADEMY	PR24	
Dates	**Location**	**Course Hours**
10-13-14	ASPC-KINGMAN	7
Instructor's Name *(Last, First M.I.)*	LUCERO, WEESCHEID, FARRIS, WARD, SELIANINI.	

	Participant's Name (Last, First M.I.) (Please Print Legibly)	Employee Identification Number	Institution/Unit	Shift: Day	Shift: Swing	Shift: Grave Yard	Date Completed
1	[redacted]	[redacted]	ASPC-K/HUALAPAI				
2			ASPC-K/C-Cbat				
3			ASPC-K/Cerbat				
4			ASPC-K-Hualapai				
5			ASPC-K-Cerbat				
6			ASPC K Hualapai				
7			ASPC-K-Cerbat				
8			ASPC-K HUALAPAI				
9			ASPC-K/Cerbat				
10			A.S.P.C.-K./Cerbat				
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Instructor's Signature [redacted]

Training Officer's Signature [redacted]