



**DAVE YOST**  
OHIO ATTORNEY GENERAL



Ohio Peace Officer Training Commission  
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P.O. Box 309  
London, OH 43140  
[www.OhioAttorneyGeneral.gov](http://www.OhioAttorneyGeneral.gov)

## **Court Officer Instructor - Unit Application**

The following criteria must be met:

- Must be a high school graduate or possess a GED
- Five years relevant experience as a full-time law enforcement officer
- Completion of OPOTC-approved 80-hour Instructional Skills course
- Topic 01-01 Handgun Training- Semiautomatic Pistol, completion of approved OPOTC "Semi-Automatic Pistol Instructor" course

Return application with all supporting documentation to:

Email: [OPOTC.Instructors@OhioAttorneyGeneral.gov](mailto:OPOTC.Instructors@OhioAttorneyGeneral.gov)

Ohio Peace Officer Training Commission  
Professional Standards Division  
P.O. Box 309  
London, Ohio 43140  
FAX: (740) 845-2675



### Court Officer Instructor - Unit Application

This form may be emailed to: [OPOTC.Instructors@OhioAttorneyGeneral.gov](mailto:OPOTC.Instructors@OhioAttorneyGeneral.gov)

Name \_\_\_\_\_ Alias: \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
No./Street/P.O.Box City County State Zip Code

Phone Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ SSN (Last 5): \_\_\_\_\_ DOB: \_\_\_\_\_ Male  Female

Email \_\_\_\_\_

**\*Email required for receiving Certificate.**

By checking this box, you are authorizing OPOTC to add your Instructor information to the Instructor Directory on OHLEG. You may be contacted in their efforts to find an instructor.

Commander Email \_\_\_\_\_

Check if certificate is also to be emailed to Commander.

#### I. Education

##### High School Diploma/GED

High School Name	Address	Date received

##### Experience

Agency Name	Time employed	Title/Position	Dates of Employment

##### Completion of 80 hour Commission approved Instructional Skills Course (attach certificate)

Location of Instructor Skills Course	Dates Attended	Date Completed

##### Completion of Commission approved Semi-automatic Pistol Instructor Training Course (attach certificate)

Location of Course	Dates Attended	Date Completed



**II. Background Information**

Have you ever been investigated, disciplined, or terminated for any matters alleging theft, falsification, dishonesty, violence, immorality, ethical misconduct, and/or sexual misconduct? If yes, include a detailed summary.

Yes       No

Have you ever been convicted of a felony, or are you subject to a firearms disability or prohibition? If yes, include a detailed summary.

Yes       No

**III. Commander Recommendation and Intent to Employ**

\_\_\_\_\_  
**(initial)** I attest that the information provided in this application is, to the best of my knowledge, true and accurate. I understand that falsification of any information may impact my ability to command this school or future schools, may impact my status as an OPOTC-certified commander, and may carry other legal consequences.

\_\_\_\_\_  
**(initial)** Within the next 12 months, I intend to employ this applicant as an instructor in an OPOTC-approved academy that I will command.

Attesting to the above, I recommend this application be accepted and the applicant certified.

\_\_\_\_\_  
School Commander's Name

\_\_\_\_\_  
School Commander's Signature

\_\_\_\_\_  
School Name

\_\_\_\_\_  
OPOTC COC or BTC Number    Date

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email