

Trainee Name: \_\_\_\_\_

Training Coordinator: \_\_\_\_\_

**RECEIVING AND HANDLING PHYSICAL EVIDENCE – PHASE III (PRESERVATION – WITH SAMPLING)  
TRAINING DOCUMENTATION FORM**

**Category of Evidence (circle one):**      **Mouth Contact Items**      **Clothing**      **Trace DNA**      **Sexual Assault Objects**

Each section in the chart below must be initialed and dated by the training coordinator. If any task is not completed, this must be explained in the training file and approved by the Program Manager. A separate Training Documentation Form is required for each category of evidence on which training is conducted.

TASK	BEGIN DATE	PRACTICAL EXERCISES	COMPLETE DATE	COMMENTS
<b>Required Readings/SOPs</b>				
<b>Discussion/Consultations with Examiner(s) and Training Coordinator RE: Other Sections</b>				
<b>Observation of Routine Examinations on Evidence by Examiners:</b>				Open rows may be used to document a sampling of what was observed, if desired. Full documentation is maintained in the training notebook.
<b>Observation of Routine Examinations on Evidence by Examiners (Practice Notes):</b>				Open rows may be used to document a sampling of what was observed, if desired. Full documentation is maintained in the training notebook.

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<b>Observation of Routine Examinations on Evidence by Examiners (Practice Notes – Cont.):</b>				Open rows may be used to document a sampling of what was observed, if desired. Full documentation is maintained in the training notebook.
<b>Oral Competency to Perform on Casework Under Supervision:</b>				
<b>Examination, Description, Preservation, and Documentation of Evidence (Competency):</b>		≥ 5		A minimum of five (5) cases must be documented here. Additional rows may be used, if desired. Full documentation is maintained in the training notebook.

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TASK	BEGIN DATE	PRACTICAL EXERCISES	COMPLETE DATE	COMMENTS
<b>Training Q&amp;A Sessions: (Minimum of One)</b>	Number will vary based upon need of trainee as assessed by the training coordinator. Not all rows need be used. Document name of person(s) conducting Q&A in the comments field.			
Q&A 1				
Q&A 2				
Q&A 3				
Q&A 4				
<b>Training Notebook Review(s): (Minimum of One)</b>	Number of times will vary based upon need of trainee as assessed by the training coordinator. Not all rows need be used.			
Review 1				
Review 2				
Review 3				
Review 4				
<b>Final Steps for Qualification:</b>				
Final Notebook Review				
Final Oral Question and Answer				