



STATEMENT OF INFORMED CONSENT

I,(print your name) _____, understand fully that as part of my employment with the Lexington-Fayette Urban County Government, Division of Community Corrections, I am required to participate in and successfully complete all aspects of training to include; Pressure Point Control Tactics Course both written and practical skill, O.C. Pepper Spray Certification both written and O.C. exposure. That I will not fail more than four written tests including test re-takes but I must pass any individual test within 2 re-takes and I must maintain a minimum 70% overall average at the end of six weeks classroom instruction. That I must satisfactorily perform those duties of a Community Corrections Officer while under the supervision of the Training Bureau and my Field Training Officer. I certify that I have no physical impairments, medical conditions or infirmity that would prevent me from participating in and successfully completing the required training. I understand that if I fail to participate in and successfully complete any aspect of my training, that my probationary employment may be terminated.

Signature

Date

