



**Commonwealth of Virginia  
Virginia Department of Criminal Justice Services**

**Field Training for Jail Deputies and Officers (Form J-1)**

Officers Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Department: \_\_\_\_\_

Academy Attended: \_\_\_\_\_

Academy Completion Date: \_\_\_\_\_

Performance Outcome	Date of Completion	Printed Name of Field Training Officer	Signature of Field Training Officer
<b>Department Policies, Procedures and Operations</b>			
9.1			
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<b>Use of Force, Weapons Use</b>			
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9.36			
9.37			

