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| **DCJSlogo2011BWCOMMONWEALTH OF VIRGINIA** **Department of Criminal Justice Services**  P.O. Box 1300 • Richmond, VA 23218 Phone: (804) 786-4700 • Fax: (804) 786-6344 [www.dcjs.virginia.gov](https://www.dcjs.virginia.gov) | | | |
| Private Security Services – TRAINING SCHOOL COMPLIANCE INSPECTION | | | |
| **Information** | | | |
| Date: | School Number: | | Audit Number: |
| Training School: | | Training School Director: | |
| Mailing Address (Street/Apt.#): | | City, State, Zip: | |
| Physical Address (if different that mailing address): | | City, State, Zip: | |
| Email Address: | | Contact Name: | |
| Business Phone: (   ) | | Fax: (   ) | |
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| **PART 1 – General Provisions** | | | |
| Comp. Non/Comp. N/A   1. School address, 6 VAC 20-173-70.1 2. Designated training director, 6 VAC 20-173-70.2 3. Notification: Instructors or SMS, 6 VAC 20-173-70.5 4. Display training school certification, 6 VAC 20-173-70.6 5. Liability insurance, 6 VAC 20-173-70.7 6. Notification of convictions, 6 VAC 20-173-70.8 7. Any change in ownership, 6 VAC 20-173-70.10 8. Any change in operating name, 6 VAC 20-173-70.11 9. Any change in entity, 6VAC 20-173-70.12 10. Maintain authorization for SMS, 6 VAC 20-173-70.13 11. Lesson plans/each training subject, 6 VAC 20-173-70.14 12. Lesson plans/ entry level subject, 6 VAC 20-173-70.15 13. Lesson plans/in-service subject, 6 VAC 20-173-70.16 14. Lesson plans/each firearms subject, 6 VAC 20-173-70.17 15. Date lesson plans/handouts, 6 VAC 20-173-70.18 16. Ensure DCJS has current copies of the following: 6 VAC 20-173-70.19 17. List of all training locations 18. List of all firing ranges 19. List of all SMSCurrent copies 20. Copies of current topical outlines for all lesson plans 21. Maintain current files that include:, 6 VAC 20-173-80.4 22. attendance records 23. master final examination 24. pass/fail recording of exam and firearms scores 25. training completion rosters 26. training completion forms/each student for 3 years 27. School number/advertising materials, 6 VAC 20-173-80.7 28. Session Notification Forms, 6 VAC 20-173-170.B.1 29. Changes-TSN Form, 6 VAC 20-173-170.B.2 | | | |

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| Comments/Violations *(you may include additional pages if needed)* | |
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| Database update needed:  Yes  No | Additional forms attached:  Yes  No |

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| Inspection Acknowledgement |
| The results of this inspection have been fully explained to me by the Virginia Department of Criminal Justice Services agent investigator. I understand that areas of noncompliance must be corrected by \_\_\_\_     \_\_\_\_\_\_\_, and that administrative action may occur as a result of this inspection.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Investigator Signature Date School Director's Signature Date       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Print Name Print Name |