

MARYLAND DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES

Commission on Correctional Standards

Training Certification

THIS IS TO CERTIFY THAT:

THE INDIVIDUALS LISTED BELOW HAVE BEEN TRAINED IN THE POLICIES AND PROCEDURES OF _____; (Private Home Detention Monitoring Agency)

THE INDIVIDUALS LISTED BELOW HAVE BEEN TRAINED IN THE PROPER USE OF THE ELECTRONIC MONITORING EQUIPMENT USED BY THIS MONITORING AGENCY, WHICH IS _____; (List the brand of electronic monitoring equipment)

AS AN APPLICANT, I HAVE BEEN TRAINED IN THE PROPER USE AND CAPABILITIES OF THE ELECTRONIC MONITORING EQUIPMENT USED BY THIS MONITORING AGENCY BY _____, ON _____. (Name of Manufacturer Representative*) (Date)

THAT AS A RESULT OF THIS TRAINING, I, AS APPLICANT, AND ALL THOSE LISTED BELOW, ARE KNOWLEDGEABLE IN THIS MONITORING AGENCY'S OPERATIONS AND THE EQUIPMENT USED TO PROPERLY MONITOR INDIVIDUALS AS ORDERED BY THE COURT.

Table with 3 columns: Individual Trained, Date of Training, Name of Trainer. Includes five rows of blank lines for data entry.

Certified _____ (Applicant) Date: _____

Attachment: *Letter verifying this individual as a manufacturer representative on that Company's letterhead.