ST. JOHNS RIVER STATE COLLEGE
CRIMINAL JUSTICE TRAINING PROGRAM
EQUIVALENCY OF TRAINING (EOT) COURSE

SKILLS DEMONSTRATION OF PROFICIENCY
AFFIDAVIT OF PARTICIPATION

Applicant's Name: _____
Last First Middle

By my signing below, I thereby acknowledge I understand that the course upon which I am planning to embark does contain certain required portions in the following skills: defensive tactics, firearms, first aid, (and for law enforcement EOT students only) driving. I further understand that all of these skills will require physical exertion during practice sessions and during actual demonstrations of proficiency.

Still further, I attest that to the best of my knowledge, I do not have, nor have I ever been advised by a medical practitioner of any illness, disorder, or disability that would disallow, discourage, limit, or prevent physical exertion. In addition, I recognize that I am responsible for disclosing to Criminal Justice staff prior to the applicable skills portion(s) of the course any preexisting or existing condition that would keep me from participating fully in the skills portions.

NOTE: THIS FORM MUST BE NOTARIZED

Applicant's signature: _____ Date signed: _____

Witness my hand and this official seal, this_____ Day of _____ A.D.

_____
Notary Public

My commission expires _____

NOTICE: This document shall constitute an official statement within the purview of Section 837.06, Florida Statues, and is subject to verification by the school and/or the Criminal Justice Standards and Training Commission. Any intentional omission when submitting the application or false execution of this affidavit shall constitute a misdemeanor of the second degree and disqualify you from entering or continuing in the Equivalency of Training (EOT) course and may disqualify you from employment as an officer.