

NCJA DRIVER INSTRUCTOR RECOMMENDATION

TO: Campus Operations Manager
North Carolina Justice Academy

DATE:

FROM: _____
(Name of Agency Head or Designee)

(Title)

(Agency)

SUBJECT: Driver Instructor Authorization Request

_____, _____, is a
(Name) (Title)
driver instructor with this Agency/Department and is recommended by this Agency/Department to be present and conduct driver training on the North Carolina Justice Academy precision driving track.

- I. Instructor has attended and successfully completed the following driver instructor schools/courses (include name of school, date and location of training):

- II. Instructor has had the following driver instructor experience:

- III. Instructor is certified as a driver instructor by the North Carolina Criminal Justice Training and Standards Commission. (Enter name appearing on the certificate and the certification number.)

NOTE: Attach copies of certificates/transcripts for #I and #III above.

Signature of Agency Head or Designee

Please list mailing address below for both Agency Head/Designee and driver instructor.