



# Georgia Peace Officer Standards & Training Council

## ***Application for Instructor Certification: Designated (Level IID), Guest, or Brazilian Jiu Jitsu (BJJ)***

| <b>Demographic Data – Section I</b>             |   |
|---|---|
| <i>Last Name</i><br>Doe                         | <i>Social Security Number</i><br>123-45-6789    |
| <i>First Name</i><br>John                       | <i>Date of Birth(mm/dd/yyyy)</i><br>01/01/1965  |
| <i>Middle Name</i><br>David                     | <i>Suffix</i>                                   |
| <i>E-Mail Address</i><br>bjj@mainstreetbjj.com  | <i>Candidate's Phone Number</i><br>404-555-5555 |
| <i>Employing Agency</i><br>Main Street BJJ      |   |
| <i>Agency Street Address</i><br>123 Main Street |   |
| <i>City</i><br>Atlanta                          | <i>Zip Code</i><br>30309                        |

| <b>Education – Section II</b>   |   |
|---|---|
| List the highest level of education you have attained. If your highest level is a high school diploma, you do not need to attach a copy. Diplomas for degrees must be attached. |   |
| <i>Highest Level of Education (Select one)</i><br>High School Diploma   | <i>Graduation Date of Highest Level</i><br>06/01/1983 |
| <i>College/University/School Name for Highest Level of Education</i><br>City High School  |   |
| <i>City &amp; State Location of School for Highest Level of Education</i><br>Atlanta, GA  |   |

| <b>Instructor Type – Section III</b>   |
|--|
| Select the Instructor Certification you are applying for:  |
| <input type="checkbox"/> Designated Instructor – Complete Sections IV, V, VI, VII, IX, X, and XI                 |
| <input type="checkbox"/> Guest & Out-of-State Instructor – Complete Sections IV, VIII, IX, X, and XI             |
| <input checked="" type="checkbox"/> Brazilian Jiu Jitsu (BJJ) Instructor – Complete Sections IV, VIII, IX, and X |



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| Experience Type – Section IV  |                                  |
|---|----------------------------------|
| <input type="checkbox"/> Check here if you are a Georgia POST certified peace officer and continue to the next section.<br><br>If you are not a Georgia POST certified peace officer, use this section to list the two most recent years of employment that directly relates to your subject matter or topic areas. |                                  |
| Employing Agency<br>Main Street BJJ   |                                  |
| Agency Street Address<br>123 Main Street  |                                  |
| City<br>Atlanta   | State<br>GA                      |
| Employed from (mm/yyyy)<br>01/2010  | Employed to (mm/yyyy)<br>06/2023 |
| Employing Agency<br>First Avenue BJJ  |                                  |
| Agency Street Address<br>987 First Avenue   |                                  |
| City<br>Atlanta   | State<br>GA                      |
| Employed from (mm/yyyy)<br>01/1995  | Employed to (mm/yyyy)<br>01/2010 |

| Instructor Training – Section V  |   |
|--|---|
| For Designated Instructor applicants only. A copy of your Level IID Instructor Training Course completion certificate <b>MUST</b> be attached. |   |
| Course Name  | Completed on (mm/dd/yyyy)                     |
| Course Location  | Instructor Training Course Hours (# of hours) |

| Designated Certifications – Section VI                               |  |   |  |
|--|--|---|--|
| Select the Designated Instructor Certification you are applying for: |  |   |  |
| <input type="checkbox"/> Defensive Tactics (CD09900)                 | <input type="checkbox"/> Firearms (CF09900)        | <input type="checkbox"/> Driver Training (CT09900)  | <input type="checkbox"/> Hazardous Materials (CH09900) |
| <input type="checkbox"/> Emergency Medical (CE09900)                 | <input type="checkbox"/> Blood Detection (CR09900) | <input type="checkbox"/> Master Resiliency (AIM09G) | <input type="checkbox"/> Use of Force (SIM17G)         |



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| <b>Designated Instructor Training – Section VII</b>  |                              |
|--|------------------------------|
| List all training that qualifies you to teach in this area. Copies of diplomas/certificates <b>MUST</b> be attached in order for any training to be considered. If necessary, use additional paper to list all training. |                              |
| Course Name  | Completion Date (mm/dd/yyyy) |
| Course Location (Academy/Vendor – State)   | Course Hours (# of hours)    |
| Course Name  | Completion Date (mm/dd/yyyy) |
| Course Location (Academy/Vendor – State)   | Course Hours (# of hours)    |

| <b>Credentials/Qualifications – Section VIII</b>   |                        |           |
|--|------------------------|-----------|
| List any credentials or qualifications that you possess that should be considered for this application. You may attach your curriculum vitae, résumé, or additional documents if necessary. List all attachments here: |                        |           |
| List: Belt level, training hours, instructing experience, etc.<br>List attachments: resume, training logs, awards, etc.  |                        |           |
| List the Course and Topic the Guest or BJJ Instructor will teach and give the frequency of instruction during the year.  |                        |           |
| Course   | Topic                  | Frequency |
| Basic BJJ for Peace Officers   | BJJ for Peace Officers | Weekly    |
| Course   | Topic                  | Frequency |

| <b>Attestation – Section IX</b>  |                        |
|--|------------------------|
| I hereby attest & affirm that the information contained herein is complete, true, and correct to the best of my knowledge. |                        |
| Candidate's Signature _____ <i>John Doe</i>  | Date <u>06/06/2023</u> |



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| <b>Requesting Agency/Organization (if other than academy) – Section X</b>     |                    |
|---|--------------------|
| <i>Requesting Agency/Organization</i><br>Main Street BJJ                      |                    |
| <i>Street Address</i><br>123 Main Street                                      |                    |
| <i>City</i><br>Atlanta  | <i>State</i><br>GA |
| <i>Title and Name of Agency Representative</i><br>Primary Instructor John Doe |                    |
| Agency Representative's Signature _____<br><i>John Doe</i>                    |                    |
| Date of Request <u>06/06/2023</u>   |                    |

| <b>Academy Director Approval – Section XI</b> |
|---|
| <i>Academy Name</i><br>_____                  |
| Director or Representative's Signature _____  |
| Date of Request _____                         |



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## ***Application for Instructor Certification: Designated (Level IID), Guest, or Brazilian Jiu Jitsu (BJJ)***

### **Application Checklist**

Use the checklist below to ensure your application is complete. If you have any questions, contact the Georgia POST Council Help Desk at (770)-732-5604 or [helpdesk@gapost.org](mailto:helpdesk@gapost.org). Please include a copy of this checklist with your application.

- Copy of diploma or degree (as required)
- Copy of Level II Instructor Course Completion Certificate (***Required for Designated Instructor Applications***)
- Copies of Diplomas/Certificates for Specialized subject areas (as required)  
\_\_\_\_\_ Number of documents/files attached for this requirement
- Credentials, curriculum vitae, résumé, and/or additional documents (as required)  
  3   Number of documents/files attached for this requirement
- Copy of signed and dated Code of Ethics Form (***Required***)