

Remedial Training Assignment Worksheet

REPORT DATE: _____ PHASE: _____ START DATE: _____ END DATE: _____

Trainee (Last, First MI)	Badge / ID	Field Training Officer (FTO)	Badge / ID

PART A. PERFORMANCE DEFICIENCIES

Your FTO has identified one or more areas of deficient performance that require your immediate attention for improvement. You will be expected to fully complete this training assignment by this date: _____

Define the specific problem with example(s). Describe the training already conducted:

PART B. TRAINING ASSIGNMENT

Describe the specific assignment(s) given to the trainee to correct the above problem. The trainee will be expected to perform at a satisfactory level in identified area(s).

NOTE: Your FTO will describe the required assignment needed to improve your performance in terms of specific goals and objectives.
Example: Trainee will practice self-initiated car stops daily for 4 shifts, resulting in a minimum of 4 field interviews and 2 citations per shift.

I have reviewed/discussed the above training assignment with my FTO and understand the specific goals and objectives.

Trainee's Signature ► _____ Date _____

PART C. ASSIGNMENT COMPLETION

- Has the trainee completed this training assignment satisfactorily? Yes No
- Is the trainee now performing at a competent level?..... Yes No
- Has an additional assignment been given? Yes No

NOTE: If the training plan was not completed satisfactorily, specific recommendations **must** be made regarding the trainee's continued substandard performance. Additional RT Assignment Worksheets should be generated outlining a follow-up training plan. **It is the responsibility of the originating FTO to ensure that RT assignment(s) are communicated to the trainee's next FTO so that follow-up can be monitored.**

Comments regarding completion of assignment:

PART D. REQUIRED SIGNATURES

I have reviewed/discussed all areas noted in this RT Assignment Worksheet and understand the evaluation given.

Trainee Signature ► _____ Date _____

FTO Signature ► _____ Date _____

Print FT SAC Name	Badge / ID	Date