

MESA POLICE DEPARTMENT END OF PHASE EVALUATION SUMMARY

Instructions: This document is formatted in tables. The box will automatically expand as type is added, if needed. Type names below the box headers. Type Phase and dates to the right of the headers. Type documentation in the box to the right of the category. Put an X in ADVANCEMENT OR REMEDIAL EXTENSION.

OIT's LAST NAME, INITIAL	EMP #	FTO's LAST NAME, INITIAL	EMP #
Phase #	Date Phase Began:	Date Phase Ends:	
COMMENT ON: Traffic Stop Proficiency	# of Stops this Phase: (approx. if not Phase I)		
COMMENT ON: Accident Proficiency	# of Accidents to this point in the FTO Program:		
COMMENT ON: Citation Proficiency	# of Citations this Phase: (approx. if not Phase I)		
COMMENT ON: DUI Proficiency	# of DUIs to this point in the FTO Program:		
COMMENT ON: Report Writing Ability	Fill out Cover Sheet on next page and attach a report as an example of the OIT's report writing ability.		
COMMENT ON: Officer Safety			
OTHER SIGNIFICANT STRENGTHS:			
OTHER SIGNIFICANT WEAKNESSES:			
REMEDIAL EFFORTS:			
RECOMMENDATIONS:	If OIT is moving to Phase IV, is the OIT Solo Ready?		
This Trainee is Recommended For: ADVANCEMENT [<input type="checkbox"/>] REMEDIAL EXTENSION [<input type="checkbox"/>]			

OIT's SIGNATURE

FTO's SIGNATURE

Reviewed by Admin. Ofc. _____

PATROL SERGEANT's SIGNATURE

Approved by FTO Sgt. _____

MESA POLICE DEPARTMENT

Report Cover Sheet

Instructions: This document is formatted in tables. The box will automatically expand as type is added, if needed. Type names below the box headers. Type Phase, DR#, and date to the right of the headers. Type documentation in the box to the right of the category. Attach Cover Sheet and report to the End of Phase Report.

OIT's LAST NAME, INITIAL	EMP #	FTO's LAST NAME, INITIAL	EMP #
Phase #	Report DR#:	Today's Date:	

COMMENT ON: Report Writing issues that need attention	
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COMMENT ON: Report Writing issues that the OIT handles well	
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