



- Course Title:** Narcotics and Dangerous Drugs – 40 hours  
Advanced Course #016
- Instructor(s):** Captain Jose Sanchez – Winter Haven Police Department
- Date(s):** March 18, 2024 – March 22, 2024
- Time(s):** 1:00PM – 10:00PM (Monday – Friday)
- Location:** Polk State College - Center for Public Safety  
Kenneth C. Thompson Institute of Public Safety  
1251 Jim Keene Blvd  
Winter Haven, Florida 33880
- Cost:** Region 8 training funds will pay for Region 8 law enforcement and correctional officers as well as Region 8 support personnel (when seats are available). **Region 8 includes Polk, Hardee, Highlands, and Desoto counties.**  
Student applications from outside of Region 8 will be placed on a waiting list to fill any open seats not filled by Region 8 officers.
- Description:** This course is part of the Criminal Justice Standards and Training Commission Advanced Training Program. This course is designed to provide criminal justice officers with information regarding narcotics and dangerous drug investigations, an understanding of the problematic, legal, investigative, and evidentiary aspects of narcotics and dangerous drug investigations, and how it relates to money laundering.

This course qualifies for **salary incentive** and **mandatory retraining**. Only courses selected for salary incentive, with the following exceptions, will be entered into FDLE's ATMS: all instructor courses, Breath Test Operator, Breath Test Operator Refresher, Agency Inspector, Agency Inspector Refresher, and Canine Team Training

Kenneth C. Thompson Institute of Public Safety  
at Polk State College Center for Public Safety  
1251 Jim Keene Blvd  
Winter Haven, FL 33880  
(863) 297-1030 ext.  
(863) 297-1045 fax  
  
[www.polk.edu/ips](http://www.polk.edu/ips)

**POLK STATE COLLEGE**  
**KENNETH C. THOMPSON INSTITUTE OF PUBLIC SAFETY**  
**Training Authorization & Advanced/Specialized Course Registration**

**Student Authorization (Formerly CJSTC 15A)**

**Student Registration**

Student Name: \_\_\_\_\_  
(Last Name) (First Name) (FULL Middle Name) (Sr, Jr, etc)

Student SS#: \_\_\_\_\_ Student email: \_\_\_\_\_

Supervisor/email \_\_\_\_\_

**Check one:** Law Enforcement  Corrections  Correctional Probation  Civilian

Agency Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_  
(Street) (city) (state) (zip)

|   |  |   |
|---|--|---|
| <b>Date of Birth</b><br><br><b>MM / DD / YYYY</b> | <b>Gender</b><br><br><input type="checkbox"/> Male <input type="checkbox"/> Female | <b>Telephone Numbers</b><br><br>Preferred:<br><br>Work: |
|---|--|---|

Race (Required by the U.S. Office of Education Title VI Civil Rights Act of 1964)

|   |   |  |
|---|---|--|
| <input type="checkbox"/> White (Non-Hispanic) | <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> American Indian/Alaska Native |
| <input type="checkbox"/> Black (Non-Hispanic) | <input type="checkbox"/> Hispanic               |  |

**Note: Form MUST be completed in its entirety or the officer WILL NOT be registered. Ensure that you are using the most current form for this class.** These forms are pre-filled for specific classes and located with the course announcement online <https://www.polk.edu/ips>.

**Officers/Civilians in Region 8 are at \$0.00 fee. Officers/Civilians outside of Region 8 will be placed on a waiting list to fill any open seats not taken by Region 8 officers. Only courses selected for salary incentive will be entered into FDLE's ATMS, with the following exceptions: Instructor courses, Breath Test Operator/ Refresher, Agency Inspector / Refresher, and Canine Team Training.**

| Course # | Course Title | Dates | Time | Location                 |
|----------|--------------|-------|------|--------------------------|
|          |              |       |      | Center for Public Safety |

**Course Credit (Check One):** Salary Incentive  Mandatory Retraining

Neither  (support personnel/civilians only)

Authorized Agency Representative (please print): \_\_\_\_\_

Authorized Agency Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Agency Contact Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_