



Florida Department of Law Enforcement

# DEFENSIVE TACTICS PERFORMANCE EVALUATION

Incorporated by Reference in Rule 11B-35.0024(3)(a)2., F.A.C.



CJSTC  
6

1. TRAINING SCHOOL NAME: \_\_\_\_\_ 2. CLASS NUMBER: \_\_\_\_\_

3. STUDENT'S PRINTED NAME: \_\_\_\_\_ 4. STUDENT'S IDENTIFICATION NUMBER: \_\_\_\_\_

5. THE STUDENT IS A: BASIC RECRUIT STUDENT  OR INSTRUCTOR STUDENT  OR EQUIVALENCY OF TRAINING (EOT) STUDENT

6. CHEMICAL AGENT CONTAMINATION FOR BASIC RECRUIT STUDENTS ONLY:

Indicate that the student has been contaminated by the chemical agent oleo-resin capsicum (OC) and/or orthochlorobenzal-malononitrile (CS) and performed the required defensive tactics techniques assigned by the instructor, pursuant to Rule 11B-35.0024(3)(a)3., F.A.C., and the Basic Recruit Training Instructor Guide.  YES. DATE OF CONTAMINATION: \_\_\_\_\_

7. BASIC RECRUIT AND EOT STUDENT PERFORMANCE REQUIREMENTS AND BASIC RECRUIT STUDENT RETEST:

• **DEMONSTRATION OF PROFICIENCY:** Once testing on a proficiency has begun, no additional training, assistance, or practice is allowed on that proficiency. A basic recruit or EOT student shall exhibit the appropriate stances and the principles of presence and relative positioning in the execution of the required defensive tactics techniques. A basic recruit or EOT student shall demonstrate 100% proficiency of all minimum required techniques in all categories listed in section I. to pass the performance portion of the Criminal Justice Defensive Tactics Course. The minimum number of required techniques for law enforcement and correctional probation is 28 and the minimum number of required techniques for correctional is 29.

• **WRITTEN END-OF-COURSE EXAMINATION:** A basic recruit student shall achieve a score of no less than 80% on the required written end-of-course examination.

• **RETEST:** A basic recruit student shall be given the opportunity for one additional attempt at the required demonstration of defensive tactics proficiencies or one re-examination of the required written end-of-course examination for the Criminal Justice Defensive Tactics Course, but not both.

A basic recruit student, who has failed to pass the required written end-of-course examination or the required demonstration of proficiency after a second attempt shall be deemed to have failed the Criminal Justice Defensive Tactics Course.

• **REMEDIAION PLAN ATTACHED:** YES

If a basic recruit student was not successful in the first attempt to demonstrate the required proficiencies, attach a remediation plan. Student retesting shall be documented on this form. The basic recruit student is only required to retest in the proficiency requirements failed.

8. INSTRUCTOR STUDENT PERFORMANCE REQUIREMENTS:

• **DEMONSTRATION OF PROFICIENCY:** Once testing on a proficiency has begun, no additional training, assistance, or practice is allowed on that proficiency. An instructor student shall demonstrate all the defensive tactics techniques listed on this form (all techniques listed in sections I. and II.) at 100% accuracy with the results recorded on this form. Appropriate stance and the principles of presence and relative positioning shall be exhibited in the execution of the techniques. No retest is allowed.

• **WRITTEN END-OF-COURSE EXAMINATION:** An instructor student shall achieve a minimum score of no less than 85% on the written end-of-course examination. No retest is allowed.

An instructor student who fails either the written end-of-course examination or demonstration of proficiency on the first attempt shall be deemed to have failed the Defensive Tactics Instructor Course.

9. **INSTRUCTOR TO STUDENT RATIO:** For instruction of the Criminal Justice Defensive Tactics Course or the Defensive Tactics Instructor Course, there shall be one lead defensive tactics instructor that shall be counted in the instructor to student ratio of one Commission-certified Defensive Tactics Instructor for every eight students actively engaged in defensive tactics. **Actively engaged** is defined as "a student engaged in the practical performance of any one of the approved defensive tactics techniques."

10. **DEFENSIVE TACTICS DEMONSTRATION:**  
FIRST ATTEMPT: PASS  OR FAIL   
SECOND ATTEMPT: PASS  OR FAIL

11. **WRITTEN END-OF-COURSE EXAMINATION (BASIC RECRUIT AND INSTRUCTOR STUDENT ONLY):** FIRST ATTEMPT: PASS  OR FAIL  OR N/A   
**WRITTEN END-OF-COURSE EXAMINATION RETEST (BASIC RECRUIT STUDENT ONLY):** PASS  OR FAIL

12. FAILURE OF COURSE:

- The basic recruit student has failed the Criminal Justice Defensive Tactics Course.
- The equivalency of training student has failed to demonstrate proficiency in Criminal Justice Defensive Tactics.
- The instructor student has failed the Defensive Tactics Instructor Course.

13. STUDENT'S SIGNATURE: \_\_\_\_\_ 14. DATE: \_\_\_\_\_

15. LEAD INSTRUCTOR'S PRINTED NAME: \_\_\_\_\_

16. AGENCY ADMINISTRATOR, TRAINING CENTER DIRECTOR, OR DESIGNEE'S PRINTED NAME: \_\_\_\_\_

17. AGENCY ADMINISTRATOR, TRAINING CENTER DIRECTOR, OR DESIGNEE'S SIGNATURE: \_\_\_\_\_

18. DATE EVALUATION COMPLETED: \_\_\_\_\_

Student Name: \_\_\_\_\_

Student Identification Number: \_\_\_\_\_

Agency or Training School: \_\_\_\_\_

Class Number: \_\_\_\_\_

- DEFENSIVE TACTICS TECHNIQUES.** In advance of the performance evaluation and proficiency testing, the training center director or designee shall prepare form CJSTC-6 to be used in the basic recruit or EOT class by identifying techniques to be tested that are not already marked on the form as "mandatory" and necessary to comply with the designated minimum number of techniques (law enforcement and correctional probation 28 and correctional 29). Section II. of this form does not need to be completed for basic recruit classes. The training center director or designee may also identify additional techniques on form CJSTC-6 beyond the required minimum that may also be taught and tested. The additional techniques shall not count against the student's pass/fail of the course.
- EVALUATION.** For each group of techniques evaluated, the instructor shall print and initial his or her name by the performance(s) he or she observes and rates, and record the date of the student's evaluation. Use the "comments" section to note any deficiencies in the student's performance or remediation required. Be specific when making comments, and advise the student where improvement is necessary to achieve a passing score. If the same instructor evaluates exercises listed back-to-back on this form, the instructor is permitted to sign the Evaluator's Name and Initials line for the first exercise, and then draw an arrow down through the subsequent exercises.

**I. BASIC RECRUIT AND EOT STUDENT PERFORMANCE REQUIREMENTS**

PRESSURE POINTS	DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION	
	PASS	FAIL	PASS	FAIL		
<b>DEMONSTRATE A MINIMUM OF ONE TECHNIQUE (MATS ARE OPTIONAL)</b>					<u>Comments</u>	
<input type="checkbox"/> Under the Jaw					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials	
<input type="checkbox"/> Hollow behind the Ear						
<input type="checkbox"/> Hollow behind the Collarbone						
<input type="checkbox"/> Elbow under the Shoulder Blade						
ESCORT AND TRANSPORTERS		DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
		PASS	FAIL	PASS	FAIL	
<b>DEMONSTRATE THE ESCORT POSITION AND A MINIMUM OF ONE TRANSPORTER (MATS ARE OPTIONAL)</b>					<u>Comments</u>	
<input checked="" type="checkbox"/> Escort Position (MANDATORY)					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials	
<input type="checkbox"/> Hammer Lock Transporter						
<input type="checkbox"/> Shoulder Lock Transporter						
RESTRAINT DEVICES		DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
		PASS	FAIL	PASS	FAIL	
<b>DEMONSTRATE THE APPLICATION AND REMOVAL OF A MINIMUM OF ONE TECHNIQUE (MATS ARE OPTIONAL)</b> CORRECTIONAL STUDENTS SHALL ALSO DEMONSTRATE THE APPLICATION AND REMOVAL OF LEG IRONS					<u>Comments</u>	
<input type="checkbox"/> Standing Handcuffing (to include double locking and unlocking)					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials	
<input type="checkbox"/> Kneeling Handcuffing (to include double locking and unlocking)						
<input type="checkbox"/> Prone Handcuffing (to include double locking and unlocking)						
<input type="checkbox"/> Waist Chains						
<input checked="" type="checkbox"/> Leg Restraints (MANDATORY FOR CO ONLY)						
<input type="checkbox"/> Flexible Cuffs						
<input type="checkbox"/> Flexible Leg Restraints						
FRISKS AND SEARCHES		DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
		PASS	FAIL	PASS	FAIL	
<b>DEMONSTRATE PAT DOWN AND A MINIMUM OF ONE OTHER TECHNIQUE (MATS ARE OPTIONAL)</b>					<u>Comments</u>	
<input checked="" type="checkbox"/> Pat Down (MANDATORY)					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials	
<input type="checkbox"/> Custodial Search						
<input type="checkbox"/> Inmate Clothed Search						

Student Name: \_\_\_\_\_

Student Identification Number: \_\_\_\_\_

BLOCKS AND STRIKES	DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
	PASS	FAIL	PASS	FAIL	
DEMONSTRATE ALL BLOCKS AND A MINIMUM OF FIVE STRIKING TECHNIQUES (MATS ARE OPTIONAL)					<u>Comments</u>
<input checked="" type="checkbox"/> Upper-Area Block (MANDATORY)					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials
<input checked="" type="checkbox"/> Mid-Area Block (MANDATORY)					
<input type="checkbox"/> Palm Heel Strike					
<input type="checkbox"/> Punches					
<input type="checkbox"/> Hammer Fist Strike					
<input type="checkbox"/> Backfist Strike					
<input type="checkbox"/> Elbow Strike					
<input type="checkbox"/> Knee Strike					
<input type="checkbox"/> Front Kick					
<input type="checkbox"/> Angle Kick					
TAKEDOWNS	DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
	PASS	FAIL	PASS	FAIL	
DEMONSTRATE A MINIMUM OF TWO TECHNIQUES (MATS ARE REQUIRED)					<u>Comments</u>
<input type="checkbox"/> Straight Arm Takedown					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials
<input type="checkbox"/> Hammer Lock Takedown					
<input type="checkbox"/> Shoulder Lock Takedown					
<input type="checkbox"/> Rear Takedown					
<input type="checkbox"/> Front Takedown					
<input type="checkbox"/> Hip Roll					
UPRIGHT GRAPPLING AND BODY HOLD ESCAPES	DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
	PASS	FAIL	PASS	FAIL	
DEMONSTRATE A MINIMUM OF THREE TECHNIQUES (MATS ARE REQUIRED)					<u>Comments</u>
<input type="checkbox"/> Defend and Escape from a Front Chokehold					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials
<input type="checkbox"/> Defend and Escape from a Rear Chokehold					
<input type="checkbox"/> Escape from Front Body Hold over/under Arms					
<input type="checkbox"/> Escape from Rear Body Hold over/under Arms					
<input type="checkbox"/> Escape from Side Headlock					
<input type="checkbox"/> Escape from Front Headlock					
<input type="checkbox"/> Escape from Front Football Tackle					
VASCULAR NECK RESTRAINTS	DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
	PASS	FAIL	PASS	FAIL	
(MATS ARE REQUIRED)					<u>Comments</u>
<input type="checkbox"/> Standard Vascular Neck Restraint (OPTIONAL)					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials

Student Name: \_\_\_\_\_

Student Identification Number: \_\_\_\_\_

GROUND CONTROL	DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
	PASS	FAIL	PASS	FAIL	
DEMONSTRATE A MINIMUM OF SEVEN TECHNIQUES (MATS ARE REQUIRED)					<u>Comments</u>
<input checked="" type="checkbox"/> Ground Defense Position (MANDATORY)					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials
<input checked="" type="checkbox"/> Guard Stall (MANDATORY)					
<input checked="" type="checkbox"/> Guard Break (MANDATORY)					
<input checked="" type="checkbox"/> Defend and Escape from Side Control (MANDATORY)					
<input checked="" type="checkbox"/> Full Mount Stall (MANDATORY)					
<input type="checkbox"/> Bridge and Roll					
<input type="checkbox"/> Elbow Escape					
<input checked="" type="checkbox"/> Defend and Escape from Rear Mount (MANDATORY)					
IMPACT WEAPONS	DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
(MATS ARE OPTIONAL)					<u>Comments</u>
<input type="checkbox"/> Impact Weapon Thrust (OPTIONAL)					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials
<input type="checkbox"/> Impact Weapon Swing (OPTIONAL)					
<input type="checkbox"/> Impact Weapon Block (OPTIONAL)					
WEAPON RETENTION	DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
DEMONSTRATE A MINIMUM OF TWO TECHNIQUES (MATS ARE OPTIONAL)					<u>Comments</u>
<input type="checkbox"/> Holstered Intermediate Weapon Retention					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials
<input type="checkbox"/> Drawn Baton Retention					
<input type="checkbox"/> Holstered Handgun Retention					
<input type="checkbox"/> Drawn Handgun Retention					
DEFENSE AGAINST EDGED WEAPONS	DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____		EVALUATION
DEMONSTRATE A MINIMUM OF ONE TECHNIQUE (MATS ARE REQUIRED)					<u>Comments</u>
<input type="checkbox"/> Redirection (1)					_____ First Attempt Evaluator's Name and Initials _____ Second Attempt Evaluator's Name and Initials
<input type="checkbox"/> Redirection (2)					
<input type="checkbox"/> Defense Against and Overhead Stab or Forehand Slash					

Student Name: \_\_\_\_\_

Student Identification Number: \_\_\_\_\_

**II. INSTRUCTOR STUDENT PERFORMANCE REQUIREMENTS**

WARMUP/FALLS		DATE OF ATTEMPT:		EVALUATION
		PASS	FAIL	
DEMONSTRATE THE FOLLOWING		(MATS ARE REQUIRED)		<u>Comments</u>
<input type="checkbox"/> Front Fall				
<input type="checkbox"/> Rear Fall				
<input type="checkbox"/> Side Fall				
<input type="checkbox"/> Foundation				
<input type="checkbox"/> Recover to the Standing Position				
<input type="checkbox"/> Hip Escapes				
				Evaluator's Name and Initials
THREAT ASSESSMENT		DATE OF ATTEMPT:		EVALUATION
		PASS	FAIL	
DEMONSTRATE THE FOLLOWING		(MATS ARE OPTIONAL)		<u>Comments</u>
<input type="checkbox"/> Interview Stance				
<input type="checkbox"/> Offensive Ready Stance				
<input type="checkbox"/> Relative Positioning (to include reactionary gap, danger zone, and body movement)				
<input type="checkbox"/> Hand Clearing				
<input type="checkbox"/> Evasion				
<input type="checkbox"/> Redirection				
				Evaluator's Name and Initials
RESTRAINT DEVICES		DATE OF ATTEMPT:		EVALUATION
		PASS	FAIL	
DEMONSTRATE THE FOLLOWING		(MATS ARE OPTIONAL)		<u>Comments</u>
<input type="checkbox"/> Three-Point Pin				
<input type="checkbox"/> Removing Handcuffs				
<input type="checkbox"/> Removing Flexible Cuffs				
				Evaluator's Name and Initials
UPRIGHT GRAPPLING AND BODY HOLD ESCAPES		DATE OF ATTEMPT:		EVALUATION
		PASS	FAIL	
DEMONSTRATE THE FOLLOWING		(MATS ARE REQUIRED)		<u>Comments</u>
<input type="checkbox"/> Arm Drag				
<input type="checkbox"/> Pummeling				
<input type="checkbox"/> Clinch				
<input type="checkbox"/> Sprawl				
<input type="checkbox"/> Head Butt				
<input type="checkbox"/> Foot Stomp				
<input type="checkbox"/> Shin Scrape				
				Evaluator's Name and Initials
GROUND CONTROL		DATE OF ATTEMPT:		EVALUATION
		PASS	FAIL	
DEMONSTRATE THE FOLLOWING		(MATS ARE REQUIRED)		<u>Comments</u>
<input type="checkbox"/> Guard				
<input type="checkbox"/> Side Control				
<input type="checkbox"/> Full Mount				
				Evaluator's Name and Initials
HANDGUN DEFENSE		DATE OF ATTEMPT:		EVALUATION
		PASS	FAIL	
DEMONSTRATE THE FOLLOWING		(MATS ARE REQUIRED)		<u>Comments</u>
<input type="checkbox"/> General Guidelines for Handgun Defense				
				Evaluator's Name and Initials