UNDERCOVER SCHOOL

International Undercover School Training and Consulting, LLC:

Dave Redemann
Phone: 206/484.1596

Email:

dave@undercover.org

Address:

PO Box 2081 North Bend, WA 98045

Training Offered:

- Undercover School
- Surveillance School
- Undercover
 Defensive Tactics



Class dates and locations:

September 18-29, 2017 Burien WA (CJTC)

> March 5-16, 2018 Burien WA (CJTC)

Cost: \$700.00

 The class fee will be due on the first day of class by check, cash, or money order. If submitted prior to class send to <u>PO Box 2081</u> <u>North Bend. WA 98045</u>. Make checks or money orders to International Undercover Training and Consultants, LLC.

Registration:

Please contact Dave Redemann at dave@undercover.org for registration details.

Schedule:

Monday-Friday 10:00 am- 6:00 pm

This 80 hours class combines a very thorough classroom instruction with very intense "real life" practical undercover scenarios covering 4 days. Each student will complete approximately 26 of the 34 practical scenarios provided. The training:

• Gives the students exposure to the primary narcotics sold, manufactured and distributed in the Northwest.

Upon successful completion, applicants will be able to:

- Demonstrate effective recruitment and utilization of informants.
- Identify safety considerations and unique problems associated with undercover work.
- Determine psychological challenges of undercover work and contact appropriate resources for counseling.
- Identify difficult undercover scenarios and demonstrate methods to get out of them.
- Understand prosecutorial guidelines, regulations and entrapment issues.
- Practice undercover operations risk management principles.
- Understand and practice key issues in the supervision of undercover personnel.
- Demonstrate techniques for infiltration of certain criminal organizations.
- Identify and demonstrate briefing and debriefing techniques.
- Explain unique issues associated with women in undercover work.

International Undercover Training and Consulting LLC Undercover School

Surveillance School

1. APPLICANT INFORMATION MANDATORY					
Name: <u>Last</u>		<u>First</u>		<u>Middle</u>	Male
					Female
Social Security Number	<u>r: Agency</u> :			Title/Rank:	
/ /					
Agency Address: Street or PO Box, City, State Zip			Agency P	hone: /	/
			Agency F	<u>ax</u> : / ,	l
Billing address if different than above:					
2. COURSE INFORMATION					
Course Title: Location of Co			of Course:	Course Date	<u>s:</u>
3. PREREQUISITES- If applicable					
Required course: Date/Location (s):				on (s):	
4. APPLICANT PRIORITY- If applicable					
If submitting more than one application for this course, indicate the priority of the applicant.					
1 2 3 4 5 (1 being the highest)					
5. AGENCY AUTHORIZATION/CONTACT INFORMATION					
Training Manager Name/Signature:					
Training Manager Email and Phone Number:					
Applicant Email address (Mandatory): All sections of this application are MANDATORY, if applicable					
PLEASE PRINT CLEARLY-Certificates will be printed, as the name appears on this application					
Email completed application to: dave@undercover.org					
Questions: Dave@undercover.org or 206/484.1596					
Registered	Accepted	Alternate	Denied	Cancelled	Paid