North Carolina State Crime Laboratory

Digital Evidence Section

Forensic Audio/Video Training Checklist

*This is only a guide, use in conjunction with the associated Forensic Scientist Training Program.*

*If any task is not required, enter “N/A” (to be entered by the Forensic Scientist Trainer only).*

*In order for training to be complete, both the trainee and trainer MUST sign this checklist.*

Type of Examination (circle): Audio Video

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Block I** | **Task** | **Completion Date** | **Trainee Initials** | **Trainer Initials** |
| Read all required laboratory policies and procedures (see attached document listing) |  |  |  |
| Block I Exam |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Block II** | **Task** | **Completion Date** | **Trainee Initials** | **Trainer Initials** |
| Demonstrate knowledge of the physical characteristics of various types of media |  |  |  |
| Working knowledge of the components and connections used with the forensic analysis systems currently in the Laboratory |  |  |  |
| Block II Exam |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Block III** | **Task** | **Completion Date** | **Trainee Initials** | **Trainer Initials** |
| Creation of personal reference library. |  |  |  |
| Read all required section policies and technical procedures (see attached document listing) |  |  |  |
| Read all OSAC/SWGDE best practices |  |  |  |
| Block III Exam (section policies and technical procedures) |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Block IV - Worksheet & Forensic Advantage** | **Task** | **Completion Date** | **Trainee Initials** | **Trainer Initials** |
| Use of Excel Worksheet & Location |  |  |  |
| Use of Forensic Advantage: |  |  |  |
|  RFLE |  |  |  |
|  FA Worksheet |  |  |  |
|  Object Repositories |  |  |  |
|  Transfer Evidence |  |  |  |
|  Create Evidence |  |  |  |
|  Generate Lab Report |  |  |  |
|  Communication Logs |  |  |  |
|  Scheduling Reviews |  |  |  |
|  Discovery Packets |  |  |  |
| Shadow a qualified examiner |  |  |  |
| Practice Case to Complete the Above Items (over-the-shoulder observation) |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Block V** | **Task****(Overview Only)** | **Completion Date** | **Trainee Initials** | **Trainer Initials** |
| Assist in preparing evidence for examination under the direct supervision of a trained Forensic Scientist |  |  |  |
| Demonstrate proficiency in verifying equipment used during analysis |  |  |  |
| Demonstrate proficiency in capturing or duplicating various types of media. |  |  |  |
| Successfully complete a practical examination to demonstrate his or her knowledge of the procedures for capturing forensic video evidence as written in the video forensics technical procedures |  |  |  |
| Block V Over-the-Shoulder Assessment |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Practice Cases** | **Task** | **Case Number** | **Completion Date** | **Trainee Initials** | **Trainer Initials** |
| Practice Case #1 |  |  |  |  |
| Practice Case #2 |  |  |  |  |
| Practice Case #3 |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Block VI** | **Task** | **Completion Date** | **Trainee Initials** | **Trainer Initials** |
| Validation Complete |  |  |  |
| Validation Report |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Block VII** | **Task** | **Completion Date** | **Trainee Initials** | **Trainer Initials** |
| Competency Test Written Exam |  |  |  |
| Competency Test Practical ExamCase Number: |  |  |  |
| Create Discovery Packet |  |  |  |
| Round-table |  |  |  |
| Moot Court |  |  |  |

*Trainee understands he/she must attend the next available Forensic Scientist Academy. \_\_\_\_\_\_\_*

*Trainee understands he/she may not perform case reviews. \_\_\_\_\_\_\_*

Sign once all of the above blocks have been completed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Forensic Scientist Trainee Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Forensic Scientist Trainer Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Forensic Scientist Manager Date