CRN: 14864
Course Name: AJ119 – Criminal Identification

Faculty Member: Sidney Hammond

This course will meet in a hybrid model. This means that the lecture/classroom part of the course will be online, while some or all of the lab components of the course will be instructed face-to-face in small groups, maintaining social distancing and in compliance with all Federal, State, and Local guidelines. This course will require students complete the appropriate health questionnaire (below) and wear required Personal Protective Equipment (PPE) including a mask and/or face shield.

The plan for the laboratory portion of this course is outlined below. The faculty member teaching this class will provide greater detail, via COS email or Canvas, on how the small group meetings will take place and how students are assigned to those meeting times prior to the first day of class. It is imperative you check both Canvas and your COS email as some info might not be available until the first class meeting.

Students who are not comfortable with face-to-face lab meetings should consider alternative courses to fulfill requirements. NOTE: there are a number of COS programs that are mandated by an outside agency to have required face-to-face labs for completion of the learning outcomes of the course. It is important to visit with a counselor or reviewing your Student Educational Plan before selecting new courses.

Details for Course:

This course requires face-to-face demonstrations and student hands-on application for some of the forensic techniques used by law enforcement officials and crime scene investigators. During the face-to-face sessions students are required to demonstrate their proficiency in the following areas:

- Impression evidence collection strategies
- Fingerprint collection & identification strategies
- Staged crime scene security and evidence collection techniques using contemporary methods

Expected dates for three (3) face-to-face sessions will occur later in the semester:

- November 5
- November 12
- December 8

Times will be coordinated with individual students to allow for appropriate social distancing by limiting the number of students scheduled at any one time.
Your Name (Please Print): ____________________________________________________________

Class Name: ___________________________________________ Date: _________________

In the past 2-14 days, have you experienced any of the following symptoms?

*Click Yes or No for each symptoms:*

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<tr>
<th>Symptom</th>
<th>Yes</th>
<th>No</th>
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<td>Cough</td>
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<td>Chills</td>
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<td>Repeated Shaking with Chills</td>
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<td>Muscle Pain</td>
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________________________________________

Each student will need to bring his or her own mask or wear the one provided.

For protection of others, I agree to wear my mask  Yes  No

________________________________________

Your Signature: __________________________________________