CRN: 15544
Course Name: AJ119 Criminal Identification

Faculty Member: Laura Lathrop

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:

You will read the chapter prior to coming to lab.
Lab 1: This will be an outside lab. Crime scene sketching and photography
Sept. 3rd, Thur.

Lab 2: Outside lab Fingerprint processing.
Sept. 17th, Thur.

Lab 3: Inside Sycamore IM205. Trace evidence lab with microscopes.
Oct. 1, Thur.

Lab 4: Outside lab, Blood evidence lab.
Oct. 15th, Thur.

Lab 5: Outside lab, impression evidence (shoe track, tool marks)
Oct. 29th, Thur.

Final crime scene investigation: Outside
Dec. 10th, Thur.
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 symptom:*

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<thead>
<tr>
<th>Symptom</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Cough</td>
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<td>Shortness of Breath</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: __________________________________________