



FLORIDA DEPARTMENT OF JUVENILE JUSTICE

Attempt 1 Attempt 2 Attempt 3

Protective Action Response Performance Evaluation – *State Operated Facility/Contracted Detention/ and Law Enforcement Operated Facility staff*

First _____ M.I. _____ Last _____ Last 5 digits SSN: ____-____
 Facility Name: _____ Telephone: (____) _____
 Work Address: _____ City: _____
 Zip: _____ Region (Circle one): *North Central South* Circuit: _____ County: _____
 Training Location: _____ Date of Evaluation: ____/____/____

(Check, if applicable.) This participant is on Medical Status.

NOTE: Verbal direction must be used for all techniques except Reactionary Gap, Danger Zone, and Interview Stance.

TECHNIQUES	Demo 1 S/U	Demo 2 S/U	Remedial S/U	COMMENTS
STANCE & BODY MOVEMENT – All are evaluated.				
1. Reactionary Gap				
2. Danger Zone				
3. Interview Stance				
4. Ready Stance				
5. Approach (Using 45-Degree Angle)				
COUNTERMOVES – Blocks – All are evaluated.				
6. High Block				
7. Mid-Range – Straight Arm Blows				
8. Mid-Range – Roundhouse Blows				
9. Low Block – “X” Block				
10. Low Block – Leg Raise				
COUNTERMOVES – Evasive – All are evaluated.				
11. Evasive Sidestep				
12. Evasive Sidestep w/ Redirection				
COUNTERMOVES – Releases – All are evaluated.				
13. One Wrist / Forearm Grab Release				
14. Two Wrist / Forearm Grab Release				
15. Rear Two Hand Release				
16. Two Hands Together Grab Release				
17. Front Choke Backstroke Release				
18. Front Choke Wrist Release				
19. Rear Bear Hug Release				
20. Front Bear Hug Release				

Participant's Name: _____ Attempt 1 Attempt 2 Attempt 3

TECHNIQUES	Demo 1 S/U	Demo 2 S/U	Remedial S/U	COMMENTS
COUNTERMOVES – Escapes – All are evaluated.				
21. Bite Escape				
22. Headlock Escape				
23. Full Nelson Escape				
24. Double Arm Lock Escape				
25. Front Hairpull Escape				
26. Rear Hairpull Escape				
COUNTERMOVES – Defense				
27. Ground Defense				
TOUCH – This shall be evaluated.				
28. (a) Straight Arm Escort: <i>Extended</i>				
(b) Straight Arm Escort: <i>Close</i>				
CONTROL TECHNIQUES – Staff selects 4, one of which must be Ground Control.				
29. Ground Control				
30. Baskethold				
31. Wrap-Around				
32. Arm Bar				
33. Arm Control				
34. Team Arm Control				

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TECHNIQUES	Demo 1 S/U	Demo 2 S/U	Remedial S/U	COMMENTS
TAKEDOWNS – Staff selects 3.				
35. Straight Arm to a Takedown				
36. Baskethold to a Takedown				
37. Arm Bar to a Takedown				
38. Immediate Team Takedown				
SEARCHES – This shall be evaluated.				
39. Person Search				
MECHANICAL RESTRAINTS – This shall be evaluated..				
40. (a) Standing Front Handcuffing				
(b) Standing Front Uncuffing				
MECHANICAL RESTRAINTS – Staff selects 1 rear handcuffing and uncuffing technique.				
41. (a) Standing Rear Handcuffing				
(b) Standing Rear Uncuffing				
42. Prone Handcuffing				
MECHANICAL RESTRAINTS – Staff selects 1 leg cuffing and uncuffing technique.				
43. (a) Leg Cuffing (Kneeling Position)				
(b) Leg Uncuffing (Kneeling Position)				
44. (a) Leg Cuffing (Hands on Wall)				
(b) Leg Uncuffing (Hands on Wall)				

Participant's Name: _____ Attempt 1 Attempt 2 Attempt 3

Comments (attach additional pages, if necessary): _____

- Specify the number of unsatisfactory techniques in the "Demo 2" column. _____
- Specify the number of unsatisfactory techniques in the "Remedial" column. _____
- Upon conclusion of this evaluation session, the participant: PASSED FAILED

1. _____
Evaluator's Printed Name & Initials

2. _____
2nd Evaluator's Printed Name & Initials, If Necessary

3. _____
3rd Evaluator's Printed Name & Initials, If Necessary

4. _____
4th Evaluator's Printed Name & Initials, If Necessary

This evaluation has been reviewed and discussed. _____
Participant's Signature