

## NORTH CAROLINA PRIVATE PROTECTIVE SERVICES BOARD

3101 Industrial Drive • Suite 104 Raleigh, North Carolina 27609 Phone: (919) 788-5320 • Fax: (919) 788-5365 E-Mail: <u>PPSASL@ncdps.gov</u> Web Page: <u>http://www.ncdps.gov/PPS</u>



## Written Plan of Supervision

Private Investigator Associate

Applicant's Name\_\_\_\_

Sponsor's Name

- 1. Associate will receive 160 hours of one-on-one supervision within the first year of employment;
  - (a) First 40 hours of employment will be one-on-one supervision;
  - (b) Remaining 120 hours of one-on-one will be gathered over the first year or the first 1,000 hours of employment;
- 2. The Supervising Private Investigator will meet face to face with the associate or contact by telephone at least 4 times per month to review the associate's work product;
- 3. The Supervising Private Investigator will review each case on which the associate is working;
- 4. The Private Investigator Associate Training Checklist will be updated quarterly (every three months) for Private Investigator Associates.
- 5. Associate Log and Training Checklist should be maintained pursuant to 14B NCAC 16.1101 and a copy shall be given to the Associate.
- 6. The associate/trainee will not independently of the sponsor, accept or contract employment. The Associate must have direct face-to-face or telephone contact with the sponsor or another licensed Private Investigator within the firm, association, or corporation before accepting employment or before accepting a new case.
- 7. 14B NCAC 16 .0403 Trainee Permit Requirements. (a) In addition to the requirements of Section .0200 of this Chapter, applicants for a trainee permit in private investigation or counterintelligence shall be directly supervised by a licensee approved by the Board and that supervisor shall be directly responsible for the training and investigations of the trainee.
- 8. 14B NCAC 16.0502 Polygraph Trainee Permit Requirements. In addition to the requirements of Section .0200 of this Chapter the following requirements shall apply to polygraph trainees:
  (2) The applicant shall be directly supervised by a polygraph examiner approved by the Board and that examiner shall supervise no more than three trainees at any given time;

I certify that I have read and understand all requirements above as required by 14B NCAC 16 .1100 (PIA); 14B NCAC .0403 (CIT); and/or 14B NCAC 16. 0502 (PT), and understand these requirements are my responsibility to complete.

Date\_\_\_

Associate / Trainee Signature

Sponsor's Signature

Date\_\_\_

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