

Class 5 & 7 Instructional Activities Protocol

In addition to the *License Application to Engage in a Controlled Substance Activity* (DOH-4330), complete and submit the following information for Class 5 & 7 Instructional Activities applications.

1. Applicant:

- (i) Institution authorizing the controlled substance instruction activities: _____
 (Attach the institution's controlled substance instructional activities policy – e.g., effective controls against diversion, etc.)

2. Instructor(s):

- (i) Qualifications & competence (Curriculum Vitae) of the controlled substance instructor(s) (e.g., K-9 handler, professor, etc.).
 (Attach CV)

A typical CV will include the following information:

- *Name & Contact Information* • *Publications & Presentations* • *Education*
- *Grants, Honors & Awards* • *Employment & Experience* • *Scholarly or Professional Memberships*

If the *Supervisor of Controlled Substance Activity* is not a controlled substance instructor, attach his/her CV as well.

3. Instructional Activities:

- (i) Nature & objective of the instructional activities. (Attach additional sheets as necessary)

Course Title:

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Nature & Objective (Concise Summary):

- (ii) Name, schedule & quantity of the controlled substance(s) involved. (Attach additional sheets as necessary)

Name	Schedule	Quantity

- (iii) Name, DEA registration & NYS controlled substance license of the distributor or manufacturer providing the controlled substance(s).

Name	DEA Registration	NYS Controlled Substance License

If controlled substances are to be obtained by any means other than via a DEA registered distributor or manufacturer, explain:

_____ (Attach additional sheets as necessary)