

**C.A. – Chief Accredited
Chief Law Enforcement Officer Program Application**

Applicant's Information:

Name: _____

Organization: _____

Address: _____

City, State & ZIP: _____

Email Address: _____

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1. By checking "Yes" and placing your initials below you attest to the fact that you were the duly appointed Chief Law Enforcement Officer for your organization for the full duration of either a self-assessment period or accreditation cycle.

Yes - Initials: _____

2. By checking "No" and placing your initials below you attest to the fact your organization was not assisted in any way by a paid consultant during the above period of time.

No - Initials: _____

3. By checking "Yes" and placing your initials below you attest to the fact that you were actively involved in your organization's accreditation program for the full duration of either a self-assessment period or accreditation cycle.

Yes - Initials: _____

4. By checking "Yes" and placing your initials below you attest to the fact that you committed your organization, through appropriate personnel, to helping other organizations with their accreditation programs for a period of at least one (1) year, with verifiable results.

Yes - Initials: _____ Year assisted: _____

5. Attach to this application a copy of the most recent accreditation award by your accrediting body.

Print Name: _____ Date: _____

Signature: _____

Date Awarded: _____ Approved by: _____