



Tennessee Association of Chiefs of Police
Leadership Certification Program

APPLICATION

Name _____ Title/Rank _____ Agency _____

Signature of Chief of Police (if your rank is below Chief) _____

***Chief's recommendation is required for ranks below Chief*

Current Member of the TACP? Yes No Year Joined TACP _____

Please list below all boards, committees, sub-committees, and/or special projects you have or currently serve on or have served on, with length of service: **(e.g. YMCA Board Member, 1998-2000)**

Have you served as a presenter/trainer for the TACP? Yes No

If Yes, please list topic/year: Topic _____ Year _____

Year P.O.S.T. Certified _____ Currently P.O.S.T. Certified? Yes No

Number of Years in Supervisory/Administrative Role _____

Current Position _____ # of Years in Current Position _____

Education Level attained from an accredited educational institution. *(Mark all that apply.)*

GED/High School Associate's Degree Bachelor's Degree Master's Degree Doctorate Degree

***A copy of your diploma or transcript of the highest degree obtained must accompany your application.**

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Completion of Leadership Programs: [Check all that apply and include certificate with application].

- FBI National Academy Yes No
- Southern Police Institute..... Yes No
- Northwestern Leadership Academy..... Yes No
- South Eastern Command and Leadership Academy Yes No
- Other Police Leadership Academy Yes No (if yes, list information below)

Title and Location of Course _____

Number of Weeks Attended _____

- Graduate of TACP New Chief and Sheriff Course..... Yes No
- TN Law Enforcement Executive Development Course Yes No
- Other Command Level Course Yes No (if yes, list information below)

Title and Location of Course _____

Number of Hours Attended _____

Please check all topics in which you have received training. List the number of hours attended if known. Training Certificates or other training records may be requested for review. **Department Training Record must accompany application.**

<input checked="" type="checkbox"/>	Topic	Hours	<input checked="" type="checkbox"/>	Topic	Hours	<input checked="" type="checkbox"/>	Topic	Hours
<input type="checkbox"/>	Budget/Finance		<input type="checkbox"/>	Goal Setting		<input type="checkbox"/>	Personnel Management	
<input type="checkbox"/>	Community Policing		<input type="checkbox"/>	Grants		<input type="checkbox"/>	Police Ethics	
<input type="checkbox"/>	Government & Community Relations		<input type="checkbox"/>	Homeland Security		<input type="checkbox"/>	Police Liability Issues	
<input type="checkbox"/>	Computers and Technology		<input type="checkbox"/>	Incident Command		<input type="checkbox"/>	Police Supervision	
<input type="checkbox"/>	Crime Scene Investigations		<input type="checkbox"/>	Internet & Cyber Crimes		<input type="checkbox"/>	Policy Development	
<input type="checkbox"/>	Criminal Investigations		<input type="checkbox"/>	Labor Laws		<input type="checkbox"/>	Legislative & Legal	
<input type="checkbox"/>	Cultural Diversity		<input type="checkbox"/>	Leadership		<input type="checkbox"/>	Problem Solving	
<input type="checkbox"/>	Dangerous Drugs		<input type="checkbox"/>	Media Relations		<input type="checkbox"/>	Public Speaking	
<input type="checkbox"/>	Developing Initiatives/Project Management		<input type="checkbox"/>	Motivation Techniques		<input type="checkbox"/>	School Security	
<input type="checkbox"/>	Emergency Management		<input type="checkbox"/>	Multiple Generation Workforce		<input type="checkbox"/>	Team Building	
<input type="checkbox"/>	Employee Discipline		<input type="checkbox"/>	Narcotics Enforcement		<input type="checkbox"/>	Use of Force	
<input type="checkbox"/>	Gangs		<input type="checkbox"/>	Performance Evaluations		<input type="checkbox"/>	Vehicle Pursuits	

Total Hours _____

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Total Number of Law Enforcement Training Hours Achieved to Date (other than the previously listed on page 2): _____

Sum the Total Hours from page 2 plus the Total Number of Law Enforcement Training Hours Achieved to Date: _____

From the cumulative total number of training hours achieved, how many hours encompass administrative, supervisory, leadership and/or executive level training*?

Administrative _____
Supervisory _____
Leadership _____
Executive _____
TOTAL _____

*Note: Not all coursework will fall into these categories.

I understand the Professional Standards Committee will determine the level of certification for which I qualify.

I have enclosed the \$35.00 application fee.

The information I have provided in this application is true and correct to the best of my knowledge.

Signature

Date

Printed Name

<p>TACP OFFICE USE ONLY</p> <p>Years of membership: _____</p> <p>Fee Paid: _____</p> <p>Received: _____</p> <p>Member in good standing: _____</p> <p>Documents included: _____</p> <p>Level Approved: _____</p> <p>Date Approved: _____</p>
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