Form 8	Law Enforcement Manager *CAREER DEVELOPMENT PROGRAM*	

MAIL: Kentucky Law Enforcement Council
Attn: CDP
2624 Research Park Drive
Lexington, KY 40511
Phone: 859-622-6218
Web: https://KLECS.ky.gov
Email: KLECS@ky.gov

INSTRUCTIONS: **A Participant Commitment Form I registering you for the Law Enforcement Manager must be submitted prior to this application.**

Law Enforcement Manager

POPS Certificate + CJED or 160 hours of Sheriff's Executive Command Course, or Strategic Leadership, or equivalent long management course, e.g., FBI NA, SPI AOC, Northwestern.

TRAINING POINTS

College/Training Points 15 classroom hours or 1 semester hour = 1 point	Master Degree	Bachelor Degree	Assoc. Degree	95	80	65	50
Years of Full-time Management Experience	**2**	**4**	**6**	**6**	**7**	**8**	**9**

SSN: _____ Name: _____ DOB: _____
Last First MI Suffix

Agency: _____ Employment Date: _____ Total Years of Full Time Law Enforcement Experience: _____

Current Rank or Title: _____ Promotion Date for Current Rank/Title: _____

Are you a Full-Time POPS Certified Officer? (only full-time may apply) Yes No

KAR Definition of Manager:

"a position between the executive and supervisor positions which is responsible for the supervision of supervisory personnel."

Number of years served as a full-time law enforcement manager with present agency: _____

Number of years served as a full-time law enforcement manager with previous agency: _____

Name of Previous Agency: _____

Management Course (CJED, 160 hours of Sheriff's Executive Command Course, or School of Strategic Leadership, FBI NA, SPI or Equivalent KLEC approved course)

NAME OF COURSE	COURSE NUMBER	COURSE YEAR	HOURS

Form 8 cont.

Educational History

College Degree Received: ☐ AA ☐ BA/BS ☐ MA/MS ☐ PHD

All college educational hours must be supported by a copy of your official transcript, which must be attached to this application. Please do not send originals. Items will not be returned.

If you are submitting training points for a college degree, please indicate below.

			Record total number of training points earned from training transcript (see transcript)
+			Record total number of college semester hours earned
			Total number of training points earned

Applicant Email: _____

_____ _____
Participant Signature Date

I attest that applicant has been a full-time Law Enforcement Manager as defined by the KAR for the number of years stated on this document.

_____ _____
Agency Head Signature Date

For KLEC office use only

_____ _____
Reviewed by Date

☐ APPROVED ☐ NOT APPROVED, WHY_____