

## Kentucky Law Enforcement Council



Funderburk Building  
4449 Kit Carson Drive  
Richmond, KY 40475

**Phone:** (859) 622-6218  
**Fax:** (859) 622-5943  
**Email:** KLECS@ky.gov  
**Web:** <https://KLECS.ky.gov>

### Temporary Instructor Certification

#### Personal Information

Full Name:	Social Security Number:
Date of Birth:	Rank:
Sworn/Non-Sworn:	

#### Academy Information

Academy Name:	Academy Address:
City/Zip:	Email:
Work Phone:	Cell Phone:
Name of Class:	Curriculum #:

#### Temporary Instructor Certification Information:

**Check to Verify Below Content has been Read and Understood:**

A Temporary Instructor Certification is only available for individuals that need to be certified instructors, who are unable to obtain the required instructor training prior to their first teaching assignment and do not meet the requirements of a waived instructor.

KRS 15.370 requires an individual to be certified or waived to teach a KLEC certified course.

503 KAR 1:100 Section 2 - *The Council may waive any training requirements for instructors who are licensed as professionals, including attorneys, physicians, or nurses.*

Expiration date is one (2) year from approval date.

This form is for the temporary certification of experts, and not for general use of having certified Law Enforcement waived.

# KENTUCKY LAW ENFORCEMENT COUNCIL

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## INSTRUCTIONS:

- This application must be typed.
- Education and training must be documented with copies of transcripts, diplomas, certificates, or other verifying documents. Please attach.
- This application form, upon completion by the applicant, must be forwarded through appropriate channels to the Executive Director of the Kentucky Law Enforcement Council.

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## APPLICATION INFORMATION REQUIRED

Attach the following:

- Copy of current training transcript(s)
- Letter of Recommendation & Experience Verification from Agency Head
- Copy of Current Resume
- Copy of Training Certificate(s) **NOT** listed on your Training Transcript
- Copy of Current CPR/First Aid Card (Required for all Skills Certification Areas)
- Copy of High School and/or College Transcript or Diploma

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## APPLICANT INFORMATION

Last Name	First Name	Middle Initial	Title/Rank		
Academy Name	Address		City/Zip Code		
Work Phone	Social Security Number		Date of Birth		
Email	Full-Time Instructor	Part-Time Instructor			
Education:	High School	AS	BA/BS	MA	PhD

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## LAW ENFORCEMENT EMPLOYMENT HISTORY

Begin with current employment and include all Law Enforcement and Military job history.

(1)

From: \_\_\_\_\_ To: \_\_\_\_\_ Total: \_\_\_\_\_  
Month Year Month Year Year(s)

\_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Rank

(2)

From: \_\_\_\_\_ To: \_\_\_\_\_ Total: \_\_\_\_\_  
Month Year Month Year Year(s)

\_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Rank

(3)

From: \_\_\_\_\_ To: \_\_\_\_\_ Total: \_\_\_\_\_  
Month Year Month Year Year(s)

\_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Rank

(4)

From: \_\_\_\_\_ To: \_\_\_\_\_ Total: \_\_\_\_\_  
Month Year Month Year Year(s)

\_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Rank

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## REQUESTING CERTIFICATION

1 Topic Area: \_\_\_\_\_ Sub-topic Area: \_\_\_\_\_

Training that qualifies me to instruct in this area (list all courses taken to support this area):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Years of Experience in this field: \_\_\_\_\_

Experience Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I am requesting certification in the following instructional topic/sub-topic areas:**

**2** Topic Area: \_\_\_\_\_ Sub-topic Area: \_\_\_\_\_

Training that qualifies me to instruct in this area (list all courses taken to support this area):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Years of Experience in this field: \_\_\_\_\_

Experience Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**3** Topic Area: \_\_\_\_\_ Sub-topic Area: \_\_\_\_\_

Training that qualifies me to instruct in this area (list all courses taken to support this area):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Years of Experience in this field: \_\_\_\_\_

Experience Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**4** Topic Area: \_\_\_\_\_ Sub-topic Area: \_\_\_\_\_

Training that qualifies me to instruct in this area (list all courses taken to support this area):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Years of Experience in this field: \_\_\_\_\_

Experience Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**I am requesting certification in the following instructional topic/sub-topic areas:**

**5** Topic Area: \_\_\_\_\_ Sub-topic Area: \_\_\_\_\_

Training that qualifies me to instruct in this area (list all courses taken to support this area):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Years of Experience in this field: \_\_\_\_\_

Experience Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**6** Topic Area: \_\_\_\_\_ Sub-topic Area: \_\_\_\_\_

Training that qualifies me to instruct in this area (list all courses taken to support this area):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Years of Experience in this field: \_\_\_\_\_

Experience Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**7** Topic Area: \_\_\_\_\_ Sub-topic Area: \_\_\_\_\_

Training that qualifies me to instruct in this area (list all courses taken to support this area):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Years of Experience in this field: \_\_\_\_\_

Experience Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Endorsement:**

The undersigned hereby certifies that the above applicant for Temporary Instructor Certification is employed by a lawfully organized police agency or a KLEC approved law enforcement academy, must be endorsed by the head of that agency/academy as precondition of temporary instructor certification.

The undersigned reviewed this application and the subject areas in which the temporary instructor certification is being requested, as well as the qualifications of the applicant and believes that this instructor/applicant is qualified and capable of instructing in all the subject areas in which certification is sought, as supported by signature of the undersigned. The undersigned recommends that the certificate request be awarded. To the best of the undersigned's knowledge and belief the applicant is of good moral character and expresses a sincere interest in, and desires to excel in law enforcement instruction.

\_\_\_\_\_  
TRAINING ACADEMY DIRECTOR'S SIGNATURE

\_\_\_\_\_  
DATE

**APPLICANT'S OATH**

As an applicant for Temporary Instructor Certification, I understand my application temporary certification will be reviewed by the Kentucky Law Enforcement Council who has the power to certify law enforcement instructors under Chapter 15 of the Kentucky Revised Statutes. Should I violate any rules, regulations, administrative laws of the Commonwealth, my certification can be revoked, or the Council can refuse to re-certify me.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE