



GEORGIA ASSOCIATION OF CHIEFS OF POLICE

Training Approval for Chiefs of Police and Heads of Agencies

If you would like to request approval for executive/management level training as set forth in Georgia Code 35-8-20, please complete the following information.

Name: _____ SSN: _____

Agency: _____

Address: _____

City: _____ Zip Code: _____

Date of this Request: ____/____/____ Fax Number: _____

Title of Training Course: _____

Date(s) of Training Course: _____

Name of Agency/Company Presenting Training: _____

Number of executive/management training hours requested _____ Was a C-12 submitted ____ Yes ____ No

The following information must be submitted with all requests:

- ✓ Data supporting the training as executive/management level training (syllabus, course curriculum, etc.)
- ✓ Qualifications of the presenter (POST Certified, Guest Instructor, etc.)
- ✓ Number of hours requested by attendee towards GACP executive/management level training.

AND

- ✓ Upon completion of the training, a certificate and/or record of course completion must be submitted to the GACP Training Director before the information can be entered onto your POST profile.

APPROVED by GACP staff as meeting the requirements for executive/management level training. _____ Hours of training approved (Based on information provided by attendee)

DISAPPROVED as meeting the requirements for executive/management level training. If you would like this request to be re-evaluated, please forward any additional correspondence to justify your request to the GACP office.

Paul T. Maharry, Training Director _____ Date _____

Frank V. Rotondo, Executive Director _____ Date _____

You can either mail or fax the completed form along with documentation to:

Georgia Association of Chiefs of Police
Attention: Paul T. Maharry
3500 Duluth Park Lane, Suite 700
Duluth, GA 30096
Fax 770-495-7872

<u>For GACP Use</u>	
__	Hours Posted in Database _____
__	Approval Sent to Chief _____
__	Entered POST Online _____
__	Course Code _____