

KENTUCKY ASSOCIATION OF CHIEFS OF POLICE RE-ACCREDITATION APPLICATION

AGENCY NAME		ORI
STREET ADDRESS	MAILING ADDRESS	
CITY	COUNTY	ZIP CODE
E-MAIL FOR CONTACT PERSON	ADMINISTRATIVE TELEPHONE	
CHIEF EXECUTIVE OFFICER	TITLE	
ACCREDITATION PROGRAM MANAGER	TITLE	

ELIGIBILITY

All law enforcement agencies having a primary responsibility for the enforcement of Kentucky Revised Statutes and or County or City ordinances are eligible for accreditation. Questions of eligibility will be resolved by the KACP Executive Committee.

AGENCY PROFILE QUESTIONNAIRE

The agency Profile Questionnaire is designed to provide information about your agency. The information will be utilized by the KACP and your accreditation assessment team to better understand your agency needs. It may also be used to provide a general profile of agencies attempting to upgrade standards of law enforcement across Kentucky.

AGREEMENT

With this application we agree to adopt and utilize policies in compliance with the Professional Standards adopted by the KACP. We further agree that we will assist the assessors assigned to make the assessment of compliance of our agency. Professional law enforcement personnel will conduct the inspection and we agree to allow them access to our department records and personnel for purposes of assessment.

We understand the commitment our agency will be making in order to work with the KACP and accept all of the above.

This report is subject to the provisions of the Freedom of Information Act and may be subject to review by third parties.

_____ BY: _____
DATE AUTHORIZED SIGNATURE TITLE

PRINTED NAME

KENTUCKY ASSOCIATION OF CHIEFS OF POLICE RE-ACCREDITATION APPLICATION

Departmental accreditation committee contacts

TITLE/NAME	E-MAIL

I. PERSONNEL

LIST ALL PERSONNEL EMPLOYED BY YOUR AGENCY:

	20_____	20_____	20_____
FULL TIME SWORN PERSONNEL			
PART TIME SWORN PERSONNEL			
RESERVE/AUXILIARY			
SEASONAL SWORN			
CIVILIAN			
OTHER			

II. OPERATIONS

DATE OF LAST MAJOR REVISION/UPDATE OF POLICIES AND PROCEDURES _____

LIST THE MOST SERIOUS PROBLEMS NOW FACING YOUR ORGANIZATION:

LIST THE ASPECTS OF YOUR AGENCY'S ADMINISTRATION, TRAINING, AND OPERATIONS MOST IN NEED OF IMPROVEMENT:
