

This checklist is provided to assist you in completing your Basic Police Academy application. Be sure your paperwork is complete. An application cannot be accepted if something is missing or filled out incorrectly. If the question does not pertain to you, write "N/A" on the line. Refer to the instructions page for detailed information about the forms. All applications shall be submitted with the paperwork in the order listed below.

- Include a color passport-size photo with your application; you can obtain one from CVS or Walgreens to name a few.
- Present your Ohio Driver's License upon submission of your application to Carole, Room A-2130, who will make a photocopy of it. Applicant can have NO more than one (1) OVI conviction within the past three (3) years of the start of the application process and NO more than two (2) OVI convictions on driving record.
- Include a copy of your high school diploma or GED equivalent.
- Ensure that Requirements & Prerequisites (form 002LCC) is signed by you and notarized.
- Ensure that the LCC Refund Schedule (form 003LCC) is signed by you and a witness signature.
- Information Letter (form 004LCC).
- Instructions-Application Open Enrollees (form 005LCC).
- General Information (form 006LCC).
- Ensure that the Entrance Physical Assessment (form 007LCC) is signed by you and notarized.
- Ensure that the Initial Physical Assessment (form 008LCC) is signed by you and notarized.
- Complete Model Release Form (form 009a).
- Complete Information Sheet (form 010LCC).
- Complete Emergency Contact Sheet (form 011LCC).
- Ensure that Lakeland's Statement of Understanding (form 012LCC) is signed and notarized
- Include a copy of your DD-214 if applicable. Military only.
- Ensure that the Felony Convictions & Weapons under Disabilities (form 013LCC) is signed by you and notarized.
- Ensure that the Minor Misdemeanor Violation (form 013aLCC) is signed by you and notarized.
- Ensure that OPOTC BPA Disqualifying Offenses (form 013b) is signed by you and a witness signature.
- Ensure that the Notice to Open Enrollees (form 014LCC) is signed by you and notarized.
- Financial Aid Opportunities (form 015LCC).
- Include Financial Aid application and Schell Loan application (form 016 and form 017LCC).

- Fingerprinting Information (form 018LCC).
- Ensure Waiver of Liability and Indemnity Agreement is signed by you and a witness signature (form 021LCC).
- Complete and sign Authorization for Use or Disclosure of Drug Screen Information (form 022LCC). Form must be completed between **December 20, 2016 – January 15, 2017.**
- Ensure OPOTC (form SF101unv) Statement of Understanding is signed by you and a witness signature.
- Complete OPOTC (form SF102unv) Request for National WebCheck (form **MUST** be signed and dated by applicant). You will take this form with you to your fingerprinting appointment (**be sure you have your fingerprints done between the dates of: December 19, 2016 – January 15, 2017.**
- Ensure that OPOTC (form SF103) Waiver of Liability and Indemnity Agreement is signed by you and a witness signature.
- Ensure that OPOTC (form SF104) FERPA Consent to Release Student Information is signed by you.
- Complete OPOTC (form SF113) Student Acknowledgement Form and signed by you. The Commander will sign this at a later date.
- Complete OPOTC Student Health Form and Medical Examination Form (form SF114bas)
(Signed appropriately by your doctor – see **instructions** for specifics) **Not before September 20, 2016.**
- Complete OPOTC Student Enrollment/Certification Record (form SF115unv).
- Complete and sign Authorization for Use or Disclosure of Drug Screen Information (form S147bas).
- Complete OPOTC Basic Training Physical Assessment Form (form SF195bas).
- Ohio BMV Record Request (driving record only). Go to your local BMV to have your driving record printed. Please do not have your records printed until **AFTER December 19, 2016.** Results need to be submitted to Carole Dunkelberg's office (A-2130) by **January 6, 2017.**
- Turn in the application prior to deadline: **Thursday, December 1, 2016, by 2:00 p.m.**
- Pay the non-refundable application fee of \$250 and submit copy of receipt to Program Assistant in A-2130 as well as Register for the following pre-tests:
 - Physical Pre-Assessment
 - Psych Exam
 - WebCheck Fingerprinting

**Basic Police Academy
Requirements and Prerequisites**

- Lakeland Community College Police Academy will automatically disqualify an applicant/cadet for any of the following: Falsifying, omitting, or failing to report true information, or misrepresenting any information by any form or means, anytime during the application process or academy session. This includes providing false information by any form or means to: the Ohio Peace Officer Training Commission, Ohio Peace Officer Training Academy, in telecommunications, social media, and/or to other Academy students.
- Must be a U.S. citizen.
- 20 years of age by the start of the Academy.
- Must be a high school graduate or GED equivalent.
- Completion of Basic Police Academy application by **December 1, 2016**.
- Prior to acceptance, applicant must pass the OPOTC Physical Fitness evaluation.
- Prior to acceptance applicant must pass our Psychological exam.
- Prior to acceptance, applicant must pass a drug screen test.
- Possess a valid Ohio driver's license.
- NO felony convictions or serious misdemeanors.
- Sealed or expunged felony convictions as an adult and/or juvenile **may exclude** applicant from entering the police academy.
- No conviction or any domestic violence offense as defined in Ohio Revised Code Chapter 2919.25.
- NO more than one (1) OVI conviction within the past three (3) years.
- NO misdemeanor convictions within the past two (2) years of the start of the application process (minor misdemeanors excluded*).
- NO conviction for any sex offense as defined in Ohio Revised Code 2907.
- No conviction for any offense of violence as defined in Ohio Revised Code Chapter 2901.01(A)(9).

Basic Police Academy 2017

***Minor Misdemeanors:** On February 19, 2010, the Court of Appeals for the First Appellate District of Ohio in *State v. Robinson*, 2010-Ohio-543, determined that a minor-misdemeanor violation of Ohio Revised Code Section 2925.11 (possession of a drug of abuse, to include marijuana) creates a disability prohibiting the possession of a firearm by state standards, unless the person convicted has been relieved from disability.

Accordingly, Peace Officer Basic Training candidates who have previously been convicted of minor-misdemeanor possession will be barred from participating in the Academy, unless the disability is relieved by court order.

- To maintain a safe and quality learning environment, the size of an Academy class will not exceed 30 students/cadets.

Lakeland Community College Police Academy will automatically disqualify an applicant/cadet for any of the following:

- Falsifying, omitting, or failing to report true or misrepresenting any information anytime during the application process or Academy session.

Applicant Signature

Date

State of _____

County of _____

On this the ____ day of _____, 20__ before me, _____
(Notary Public name) The undersigned Notary Public, personally appeared

provided me with the satisfactory evidence to be the person whose name is subscribed this document, and acknowledged that he/she executed it. Witness my hand and official seal.

Signature Notary Public

Notary Public Seal

Notary Public, State of _____

My commission expires: _____

REFUND SCHEDULE
BPA 2017

Refund Policy:

Tuition will be refunded until 3/01/2017. Tuition is refunded minus \$250 cancellation fee and minus direct expenses (such as uniforms, shirts, physical conditioning uniform, ORC books, First Aid book).

Application Fees are non-refundable.

No refund after 3/01/2017.

I understand that there are absolutely **NO** refunds – whether I withdraw, be dismissed, or due to injury.

Applicant's Signature

Date

Witness Signature

Dear Prospective Basic Police Officer Enrollee:

Thank you for your interest in attending the regional Basic Police Academy (BPA) at Lakeland Community College. The BPA is required by Ohio Law if you want to become a peace officer. Successful completion of this 681 hour program will prepare you for this career.

**** Class size is limited to 30 enrollees meeting entry requirements of the Academy. ****

Timeline for Lakeland's Basic Police Academy 2017

- **Enrollment Packages** – Beginning **September 7, 2016**, enrollment packages will be available. See Carole Dunkelberg in the Part-Time Faculty Office, A2130 and online at <http://www.lakelandcc.edu/bpa> (Please read the instructions carefully as this is a multi-step process)
- **December 1, 2016 by 2:00 p.m.** – deadline for returning all completed program application material, application fee paid in full, and registering for the Psychological Exam, Physical Assessment and Fingerprint Background Check.
- **March 20, 2017** – Orientation and Basic Police Academy OPOTA classes begin 8:00 a.m. to 5:30 p.m. in Bldg. A, Room TBA.
- **Program hours/days** – meets from 8:00 am to 5:30 p.m., Monday through Friday. Additionally, some evenings and Saturday and Sunday classes may be scheduled.

Note: If you believe you may qualify as a sworn officer or training recruit, please contact Carole Dunkelberg at 440-525-7185 as soon as possible so that you do not miss the deadline in the event that you are considered as an open enrollee by the Ohio Peace Officer Training Council.

Psychological Examination

A mandatory Psychological examination will take place at Lakeland Community College on **December 10, 2016**, in **Room C-1010** starting at **8:00 a.m.**

In Order to Remain Eligible for the Program, you **MUST**:

- Bring your registration confirmation and driver's license to the test;
- Attend the session;
- Take and pass the psychological screening exam;
- Exceptions will not be made.

Physical Assessment

Passing a physical assessment is now mandatory for entry into the Academy. The assessment will take place at Lakeland Community College. Meet in the lobby of the Athletic and Fitness Center at noon on **December 10, 2016**. The assessment will take about two hours.

Mandatory Physical Fitness Standards

- To be eligible for admittance to Lakeland's Basic Police Academy, a student must attain at least the minimum score for all three skills as set on the ***Entrance Physical Assessment Form (25th percentile)***. *Failure to meet all three skills during the same testing session disqualifies the student to enter into the Academy.*
- At the beginning of the police academy, a student must attain at least the minimum score for all three skills set on the ***Initial Physical Assessment Form (35th percentile)***. *Failure to meet all three skills may result in immediate dismissal from the Academy.*
- Cadets must meet Physical Fitness Standards (50th percentile) for all three skills by the final assessment near the end of the academy in order to pass the Academy and be eligible to take the OPOTC certification exam.
- A copy of the physical standards is attached (007-008LCC), for your review.
- There will be **NO** exceptions.

Fingerprinting

Ohio Peace Officer Training Council requires applicants to have a National WebCheck[®] performed. The SF102unv form is included with your application.

- Complete just your part and take to the fingerprinting appointment.
- Sign and date the form and once your fingerprinting is completed, return the form to Carole Dunkelberg's office on the second floor of Bldg. A - Room 2130.

You must register at Lakeland Community College's Continuing Education Registration Office A-1044 by **December 19, 2016**. Fingerprinting will be conducted at the Lake County Sheriff's Department at 84 North Street, Painesville, OH 44077, 440-350-5676 or 5858. **Hours: Monday, Tuesday, Wednesday 8:00 am – 4:00 pm, and Thursday noon to 6:00 pm., closed Friday, Saturday, and Sunday.** Note: they are also closed between 12:00-12:30 for the lunch break! Please bring your OPOTA form SF102 and your driver's license with you.

Fingerprinting must be must be completed between **December 19, 2016 - January 6, 2017.**

Registration

- During the application process, you must register and pay the non-refundable application fee (\$250) **no later than noon on December 1, 2016**, at the Continuing Education Registration Office A-1044. Payment accepted as cash, check, or credit card.
- Upon successful completion of the above mentioned pre-tests, eligible applicants will receive an eligibility letter (Beginning to mid-February) inviting the applicant to apply for the Basic Police Academy. Once your letter is received, you must bring it with you and register and pay for the Basic Police Academy, in-county student tuition is: \$4,500 and out-of-county student tuition is: \$4,900 and is due at the time of registration. Driver's license will be needed at time of registration to show county. **Applicants will be taken on a first-come-first-served basis. Only thirty applicants will be accepted.** Register at the Continuing Education Registration Office A-1044.

....continued

Tuition and Fees for this Program will be as follows:

Title	Course Code	Dates / Times	Fees
BPA Application fee	17SBPA100.0	(due by December 1, 2016)	\$250 (non-refundable)
BPA Psych Exam	17SBPA100.0	Sat Dec. 10, 2016 Starting at 8:00 a.m. – 11:00 a.m.	N/C
BPA Entrance Physical Assessment	17SBPA100.0	Sat Dec. 10, 2016 starting at 12:00 p.m. – 3:00 p.m. (AFC)	N/C
Uranalysis Check Lake Health Services	17SBPA 100.0	Must be done between dates: 12/19/2016 – 1/6/2017	\$39.00
BPA WebCheck and Fingerprinting: 84 North State Street Painesville, OH 44077 Call 440-350-5676 or 5858 to be sure they are open before driving out.	17SBPA100.0	Must be done between dates: 12/19/2016 – 1/6/2017 Hours: Mon, Tues, Wed only between 8:00 a.m. – 4:00 p.m. or Thur.- Noon – 6:00 p.m. Closed on Fri. (closed from 12:00-12:30 for lunch)	N/C
Basic Police Academy 2017 & materials fee*	17SBPA100.0	March 20, 2017 – September, 2017 Mon- Fri. 8 a.m. – 5:30 p.m. (some evenings and weekends) <i>You will register for this once you receive your letter of eligibility, sometime in February.</i>	In-county: \$4,500* Out-of-county: \$4,900*

*includes most material fees

Enrollment Classifications

Open Enrollees - Are individuals who are U.S. citizens and at least 20 years old by the start of the Academy. They must possess a valid Ohio driver's license, have a high school degree or equivalent, and have no felony or serious misdemeanor convictions.

Appointed Officers - Are individuals who qualify under law for peace officer's training.

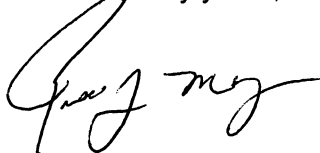
Training recruits - Are any full-time, non-sworn employees of a law enforcement agency whose primary duty is to attend and complete the basic course, and who, upon completion of the course will be appointed as peace officers by that agency.

Update Cadets - Are persons who have been reappointed as a peace officer and who need to attend only certain mandatory topics as determined by OPOTC.

Prior Equivalent Training Cadets - Are persons who have received related law enforcement training under the auspices of an agency other than OPOTC.

Refresher Cadets - Are those who have been reappointed as a peace officer after a break in service of more than one but less than four years.

Professionally yours,



Ronald J. Morenz
Basic Police Academy Commander

This memo is only for **Open Enrollees** in the Ohio Basic Police Training Academy being conducted by Lakeland Community College.

- Age Requirement: applicant must be 20 years of age at the start of the Academy and have never held a prior appointment as a peace officer in Ohio.

Do not continue any further if you are a sworn officer, i.e. you have been appointed as a peace officer or law enforcement officer in compliance with applicable state law and OPOTC regulations, or if you have been **recently reappointed** as a peace officer and need update training, - *contact Carole Dunkelberg at 440-525-7185 to obtain the correct forms.*

If you are an Open Enrollee, please pay close attention to these instructions.

- You must obtain all of the required forms, and **COMPLETELY** and accurately fill them out prior to the program application deadline at **noon on December 1, 2016**.
- It is crucial that you take the time to review all of the materials in this package. Before submitting your application packet to Carole Dunkelberg, Part-Time Faculty Office in Room A-2130, do ALL of the following:
 1. You may type or complete all forms using either black ink or dark blue ink.
 2. Do not fill in the school number or ending date of the Academy.
 3. Fill in Academy start date as **March 20, 2017**.
 4. Make sure to add your middle name or middle initial as the form requests.
 5. Fill in the school name as: Lakeland Community College.
 6. Include a color passport-size photo with you application.
 7. Present your Ohio's Driver's License upon submission of your application.
 8. Include a copy of your high school diploma or GED equivalent.
 9. Sign and date the Refund Schedule signed by you and a witness signature. (form 003LCC).
 10. Entrance Physical Assessment must be read, signed by you and notarized. (form 007LCC).
 11. Initial Physical Assessment must be read, signed by you and notarized. (form 008LCC).
 12. Completely fill out the Model Release. (form 009a).
 13. Completely fill out the Information Sheet. (form 010LCC).
 14. Completely fill out the Emergency Contact Sheet (form 011LCC).
 15. Completely fill out both the OPOTC (formSF101unv) and Lakeland's Statement of Understanding (form 012LCC) forms are signed by you and notarized.
 16. Completely fill out the Felony Convictions & Weapons under Disabilities (form 013) is signed by you and notarized.
 17. Completely fill out the Minor Misdemeanor Violation (form 013a) is signed by you and notarized.
 18. Completely fill out the OPOTC BPA Disqualifying Offenses (form 013b) is signed by you and a witness signature.

19. Completely fill out the Notice to Open Enrollees (form 14LCC) is signed by you and notarized.
20. Completely fill out Financial Aid application and Schell Loan application (form 016 and form 017), if necessary.
21. Completely fill out Waiver of Liability and Indemnity Agreement is signed by you and a witness signature. (form 021LCC).
22. Completely fill out Drug Screening Acknowledgement is signed by you and a witness signature. (form 022LCC).
23. Completely fill out Statement of Understanding (form SF101unv) is signed by you and a witness signature.
24. Completely fill out OPOTC Request for National WebCheck (form SF102unv). Form **MUST** be signed and dated by applicant. You will take this form with you to your fingerprinting appointment (be sure you have your fingerprints done between the dates of: **December 19, 2016 – January 6, 2017.**
25. Completely fill out Waiver of Liability and Indemnity Agreement (form 103) is signed by you and a witness signature.
26. Completely fill out OPOTC (form 104) FERPA Consent to Release Student Information is signed by you.
27. Completely fill out the Student Acknowledgement Form (form SF113) is signed by you and the Commander will sign this at a later date.
28. Completely fill out OPOTC Student Health and Medical Examination form is signed appropriately by your doctor). Have your physician fill out the OPOTC Medical Examination form when s/he examines you. (form SF114bas).
 - a. Make sure your name is on the medical examination form before giving it to your physician;
 - b. Make sure he/she returns it completed and signed;
 - c. The physician must also type/print his/her name and address legibly on the medical examination form;
 - d. It is your responsibility to set an appointment with your physician, at your own expense, and have this done prior to the deadline;
 - e. Forms must be signed by a licensed physician (OPOTC will only accept physical exams conducted by a medical doctor (M.D.), osteopath (D.O.), or physician's assistant (P.A.), licensed by the Ohio State Medical Board or by a certified nurse practitioner (C.N.P.), licensed by the Ohio State Board of Nursing;
 - f. Medical exam must be within **six** months of the start date of the Academy (**not before September 20, 2016**). Be sure the physician writes the date of the exam on the form.
29. Completely fill out OPOTC (form SF115unv) Student Enrollment/Certification Record.
30. Completely fill out OPOTC Basic Training Physical Assessment Form (SF195bas).
31. Turn in the application prior to deadline: **Thursday, December 1, 2016, by 2:00 p.m.**
32. Pay the non-refundable application fee of \$250 and submit a copy of receipt to secretary in A2130, as well as register for the following pre-tests:
 - Physical Pre-Assessment;
 - Psychological Examination;
 - WebCheck Fingerprinting.

Under Ohio law, peace officers of all types must complete a program of basic training before being certified. As a general rule no person may work as a peace officer without possessing a valid certificate.

To obtain certification, an individual may attend training at the Ohio Peace Officer Training Academy (London, Ohio), attend a large municipal academy (Cleveland, Columbus, etc.), or a regional academy like the one offered at Lakeland Community College.

The peace officer training function is administered on a state-wide basis by the Ohio Peace Officer Training Council (OPOTC). The current basic police curriculum (recently revised and updated) consists of a minimum of 681 hours of mandated training (including 40 hours of physical training). Each basic police program (regardless of type) must be administered by a qualified Academy Commander certified by OPOTC. The Lakeland Community College Regional Basic Police Academy is commanded by Chief Ronald J. Morenz. Basic police training has been conducted on the Lakeland campus since the early 1970's.

In addition to the local commander, a state Field Agent is assigned by OPOTC to inspect local programs. State law, state agency regulations and local sponsor-agency regulations are used as guidelines for control purposes. Application forms, proposed training calendar, instructor certifications, attendance records, facilities calendars, etc., are coordinated by the Commander through the assigned Field Agent. The state monitors the program continuously for compliance.

Instructors are chosen from local police and justice agencies to teach topics of special expertise. Certain 'blocks' of instruction that require special facilities have been assigned to individual officers with current expertise in the topic area. Judges and lawyers teach many of the legal topics. This approach guarantees maximum participation by local qualified personnel in Lakeland's program.

"Open Enrollees" are individuals who are U.S. citizens and 20 years old by the start of the Academy. They must possess a valid driver's license, have a high school degree or equivalent, and have no felony or serious misdemeanor convictions. **"Appointed Officers"** are individuals who qualify under law for peace officer training. **"Training Recruits"** are any full-time, non-sworn employees of a law enforcement agency whose primary duty is to attend and complete the basic course, and who, upon completion of the course will be appointed as peace officers by that agency. **"Update Cadets"** are persons who have been reappointed as a peace officer and who need to attend only certain mandatory topics as determined by OPOTC. **"Prior Equivalent Training Cadets"** are persons who have received related law enforcement training under the auspices of an agency other than OPOTC. **"Refresher Cadets"** are those who have been reappointed as a peace officer after a break in service of more than one but less than four years.

If you have been convicted of:

- any felony or drug related offense
- any motor vehicle crime
- any serious misdemeanor, or
- arrested for any offense of violence (including domestic violence or any related offense).

You are ineligible to enroll in the program. Please read the Basic Police Academy Prerequisites included in this packet.

Applicant's Name _____
 Last First MI

Department/Agency/Open Enrollee _____

Gender _____ M _____ F DOB ____/____/____ Age _____

Assessment Date ____/____/____ & Time: _____ Assessment Location _____

Age and Gender Minimum Scores

Exercise	Males (<29)	Females (<29)
Sit-ups (1 min.)	37	29
Push-ups (1 min.)	24	11
1.5 Mile Run	13:25	16:43
Exercise Males (30-39) Females (30-39)		
Sit-ups (1 min.)	35	21
Push-ups (1 min.)	19	9
1.5 Mile Run	14:10	17:38
Exercise Males (40-49) Females (40-49)		
Sit-ups (1 min.)	26	16
Push-ups (1 min.)	13	7
1.5 Mile Run	15:00	18:39
Exercise Males (50-59) Females (50-59)		
Sit-ups (1 min.)	20	11
Push-ups (1 min.)	9	n/a
1.5 Mile Run	16:46	20:55

Assessment Results **Pass/Fail**

_____ # Sit-ups Completed _____

_____ # Push-ups Completed _____

_____ 1.5 Mile Time _____

I/We hereby attest that the above named applicant has performed the required physical assessment in compliance with the Ohio Peace Officer Training Commission Commander Manual for Peace Officer Basic Training, p. 37, paragraph 4* and the Ohio Peace Officer Training Commission Lesson Plan for Unit 12-Physical Conditioning, Topic 1-Physical Fitness & Conditioning, Handout #1.

I/We understand that if the applicant is unable to perform in the 25th percentile of the established minimum scores for their age and gender during the Initial Physical Fitness Test administered during the first 80 hours of training at the Lakeland Community College Basic Police Academy that the applicant will be dismissed from training.

* The Academy Commander and/or his designee(s) may count repetitions and keep time in the events for the Entrance Physical Assessment.

 Applicant's Signature Date

 Notary Public Signature

 Applicant's Printed Name Date

 My Commission Expires/Seal

This form **MUST** be completed signed and notarized, and turned in with the completed application packet.

NOTE TO NOTARY: Applicant is attesting to reading the requirements of the Entrance Physical Assessment and to the Initial Physical Assessment standards.

Applicant's Name _____
 Last First MI

Department/Agency/Open Enrollee _____

Gender: M _____ F _____ DOB ____/____/____ Age _____

Assessment Date ____/____/____ & Time: _____ Assessment Location _____

Age and Gender Minimum Scores (35th percentile)

Exercise	Males (<29)	Females (<29)
Sit-ups (1 min.)	37	31
Push-ups (1 min.)	27	14
1.5 Mile Run	12:53	15:32
Exercise Males (30-39) Females (30-39)		
Sit-ups (1 min.)	33	24
Push-ups (1 min.)	21	10
1.5 Mile Run	13:25	16:43
Exercise Males (40-49) Females (40-49)		
Sit-ups (1 min.)	28	19
Push-ups (1 min.)	16	8
1.5 Mile Run	14:10	17:38
Exercise Males (50-59) Females (50-59)		
Sit-ups (1 min.)	22	12
Push-ups (1 min.)	11	n/a
1.5 Mile Run	15:53	19:43

Assessment Results Pass/Fail

_____ # Sit-ups Completed _____

_____ # Push-ups Completed _____

_____ 1.5 Mile Time _____

* Based on The Cooper Institute, Physical Fitness Specialist Course and Certification, 2002, pp 108-123

The above required physical assessment represents the 35th percentile of the established minimum scores for the cadets age and gender during the Initial Physical Fitness Test administered during the first 80 hours of training at the Lakeland Community College Basic Police Academy. The above physical assessment is in compliance with the Ohio Peace Officer Training Commission Commander Manual for Peace Officer Basic Training, p. 37, paragraph 4* and the Ohio Peace Officer Training Commission Lesson Plan for Unit 12-Physical Conditioning, Topic 1-Physical Fitness & Conditioning. Failure to meet the above standard will result in dismissal from the Lakeland Community College Basic Police Academy.

Applicant's Signature _____ Date _____

Notary Public Signature _____

Applicant's Printed Name _____ Date _____

My Commission Expires/Seal _____

This form **MUST** be completed signed and notarized, and turned in with the completed application packet.

NOTE TO NOTARY: Applicant is attesting to reading the requirements for the Initial Physical Assessment standards.

LAKELAND

COMMUNITY COLLEGE

MODEL RELEASE

For and in consideration of my engagement as a model by Lakeland Community College, hereafter referred to as the videographer/photographer, I, **(PRINT NAME)**

X _____ hereby give the videographer/photographer, his/her legal representatives and assigns, those for whom the videographer/photographer is acting, and those acting with his permission, of his employees, the right and permission to copyright and/or use, reuse and/or broadcast and republish videotape recordings and photographs of me, or in which I may be distorted in character, or form, in conjunction with my own or a fictitious name, on reproductions thereof in color, or black and white made through any media by the videographer/photographer at his studio or elsewhere, for any purpose whatsoever; including the use of any printed matter in conjunction therewith.

I hereby waive any right to inspect or approve the finished videotape, sound track, or advertising copy or printed matter that may be used in conjunction therewith or to the eventual use that it might be applied.

I hereby release, discharge and agree to save harmless the videographer/photographer, his representative, assigns, employees or any person or persons, corporation or corporations, for whom he might be acting, including any firm publishing and/or distributing the finished product, in whole or in part, from and against any liability as a result of any distortion, blurring, or alteration, optical illusion, or use in composite form, either intentionally or otherwise, that may occur or be produced in the taking, processing or reproduction of the finished product, its publication, distribution, or broadcast of the same even should the same subject me to ridicule, scandal, reproach, scorn, or indignity.

I hereby certify that I am over eighteen years of age, and competent to contract in my own name in so far as the above is concerned.

I have read the forgoing release, authorization and agreement, before affixing my signature below, and warrant that I fully understand the contents thereof. **My signature below also authorizes Lakeland to conduct a background check.**

DATE _____

SIGNATURE **X** _____

MAJOR/AREA OF STUDY _____

I PREFER TO BE REACHED BY:

PHONE NUMBER _____ MAY WE TEXT YOU? _____

E-MAIL _____

Personal Information:

Name _____

Address _____

Home Phone _____ Work Phone _____

Cell phone _____

E-mail address _____

Date of Birth _____ Sex: Male Female

Education

High School Attended:

Name of school	City	State	Date of Graduation

If not a high school graduate, have you obtained a GED

Yes (Year) _____ No

Previous Colleges Attended (List most recent college attended first)

Name of school	Location	Last Year Attended	Degrees Received

Military

Branch	MOS	Rank	Date Discharged

If you received less than honorable discharge, indicate _____

Citizenship:

Are you a United States citizen? Yes No

Your Name _____

Home Address _____

Home Phone _____ Cell Phone _____

Email Address _____

Please provide complete and accurate information for all emergency contacts listed. If this information changes at any point before or during the academy, please notify the Basic Police Academy Office to complete a new form.

1st Emergency Contact Name _____

Relationship _____ Home Phone _____

Work Phone _____ Cell Phone _____

Address _____

2nd Emergency Contact Name _____

Relationship _____ Home Phone _____

Work Phone _____ Cell Phone _____

Address _____

I understand that in the case of an emergency, Lakeland Community College or Basic Police Academy personnel may notify my emergency contacts.

Your Signature

Date

**Basic Police Academy 2017
Statement of Understanding**

Military History:

1. Are you currently in the United States Military? _____. If yes, which branch? _____

2. Have you ever enlisted in the United States Military? _____. If yes, which branch?

3. Date Enlisted: _____ Date of Discharge: _____ Type of Discharge: _____
4. Did you ever receive a less than honorable discharge? _____. If yes, why? _____

5. Attach certified or notarized copy of DD214.

Arrest/Conviction:

1. Have you ever been convicted for ANY offense of violence as an adult or juvenile? _____ If yes, list the date of arrest, offense charged, court of jurisdiction, and disposition:

2. Have you every been convicted of operating a vehicle with a suspended drivers license or operating a vehicle while under the influence of alcohol, drugs of abuse, or both? If yes, list the date of arrest, offense charged, court of jurisdiction, and disposition:

3. Have you ever been convicted of a drug offense as an adult or juvenile? _____. If yes, list the date of arrest, offense charged, court of jurisdiction, and disposition:

4. Have you ever been convicted of a felony offense in any jurisdiction of the United States or under the Uniform Code of Military Justice? _____. If yes, explain:

5. Have you ever been under investigation for any felony or crime of violence? _____. If yes, explain:

Name: _____

Physical ability:

1. Do you have any physical limitations, or injuries (past or present) that would prevent you from participating in any physical activity not limited to: running, jumping, standing or sitting for long periods of time, self-defense techniques, firearms, driving, etc? If yes, explain: _____

2. Are you a student with a disability or an IEP (Individualized Education Plan). If yes, you must provide paper documentation prior to the start of the Academy. _____

Understanding (applicant, initial after each statement):

1. I understand that I **MUST** attend all O.P.O.T.A Basic Police Officer Academy classes. Failure to do so, may result in my dismissal from the Academy. _____
2. I understand being tardy (late) to any academy class may result in my dismissal from the academy. _____
3. I understand that if I am late to more than three unexcused tardies, I will be dismissed from the academy. _____
4. I understand that **NO** Basic Police Officer Academy class(es) may be made-up without the approval of the academy commander. _____
5. I understand that if I receive approval of the academy commander to make-up any O.P.O.T.A. Basic Police Officer Academy class(es), I will be responsible for the cost of the class at a rate of \$50.00 per hour of instruction, and if required, \$30.00 per hour for each additional instructor. No make-up classes will be scheduled until payment is received in full. _____
6. I understand that if I am injured at anytime or at anyplace during the academy session, I will advise the academy commander in a reasonable time of the nature and cause of the injury. _____
7. I understand that if I fail to advise the academy commander in a reasonable amount of time, or fail to report the exact nature and occurrence of the injury, I may be dismissed from the Lakeland Community College Basic Police Academy. _____
8. I understand that if I voluntarily leave, or am dismissed from the Lakeland Community College Basic Police Academy, I will turn in ALL notes, notebooks, handouts, manuals, equipment, and uniforms issued to me by the Lakeland Community College Basic Police Academy and/or instructors. _____
9. I understand I must attain at least the minimum score for all three skills in the physical final assessment in order to pass the academy and to be eligible to take the OPOTC certification exam. The final physical assessment will be conducted during the last 80 hours of the OPOTA academy calendar. _____

Name: _____

10. I understand that if I have been convicted of:
- a. any felony or drug related offense
 - b. any motor vehicle crime
 - c. any serious misdemeanor, or
 - d. arrested for any offense of violence (including domestic violence or any related offense)
- I am ineligible to take the program. _____
11. I understand that if I ever enlisted in the United States Military, I must provide the Academy Commander with an official copy of my DD214 at the time the Basic Police Academy application is due. Failure to submit the requested information will result in dismissal from the Lakeland Community College Basic Police Academy. _____
12. I understand that I will divulge any and all criminal convictions to the Academy Commander at the time the Basic Police Academy application is due. Failure to submit the requested information will result in dismissal from the Lakeland Community College Basic Police Academy. _____
13. I understand that it is my responsibility to provide the Academy Commander with a certified copy of the final journal entry showing the level of conviction and disposition of the case. If the record has been expunged or sealed, that journal entry will also be required. Failure to submit the requested information may result in dismissal from the Lakeland Community College Basic Police Academy. _____
14. I understand that I must possess and maintain a valid Ohio Driver's License at the time of application and throughout the academy session. Failure to possess and maintain a valid Ohio Driver's License will result in my dismissal from the application process and/or the Lakeland Community College Basic Police Academy. _____
15. Do you currently hold a commission (have arrest powers, the right to carry a firearm, and been officially sworn-in) from any public sector police agency in the State of Ohio?
YES _____ NO _____
If YES, what department? _____
(Initials) _____
16. I understand that all individuals approved for certification as Peace Officers in the State of Ohio will have to successfully complete a OPOTC controlled and administered, closed-book, written final examination PRIOR to being certified. _____
17. I understand that attendance is mandatory for all OPOTC classes. _____
18. I understand that the State requires all students in an approved Basic Police Training Academy to have a "Comprehensive Notebook" prepared according to OPOTC standards. I have received a copy of the instructions for this OPOTC notebook, and understand that such a notebook must be reviewed by the Academy Commander PRIOR to approval for certification. _____

- continued -

Name: _____

19. I understand that OPOTC regulations require that a Academy Commander personally certify a student's completion of all state requirements for certification. In the event the Academy Commander at Lakeland Community College refuses to approve a student for certification, the student may appeal that decision and he will convene a formal "Board of Review" to review the records of anyone not recommended for approval by the Academy Commander. This "Board of Review" will follow the guidelines listed in current OPOTC documents when making the recommendation for approval. _____
20. I understand that should I be denied approval for examination based upon an incomplete status, the Academy Commander will not provide me with the opportunity to make up the missing time or Student Performance Objectives within guidelines issued by the State. I further understand that the OPOTC does not require that opportunity for a makeup be given. _____
21. I understand that once accepted in the Lakeland College Police Academy, I am obligated to keep the Academy Commander advised of any adverse contacts I have with law enforcement authorities. I further understand that a student who disrupts the good order of the police academy by way of any arrest, unruly conduct, sexual harassment, outbursts in the classroom or on college property; displays a pattern of disrespectful behavior towards academy staff, college staff, classmates, college students, college guests, will be dismissed from the Academy. _____
22. I understand that as a cadet in the Lakeland Community College Police Academy, if I should be arrested, subject to an arrest, or display any behavior that causes a disruption or distraction to the good of the order of the Academy, may result in dismissal from the Academy. _____
23. I understand that completion of the Academy program at Lakeland College does not guarantee that I will pass the State exam, become certified as a police officer in Ohio, or become employed by a police agency. _____
24. I understand that successful completion of the Academy program will enable me to take the State comprehensive examination administered by the Ohio Peace Office Training Council. _____
25. I understand that should I fail to pass the State examination on the first try, I will be given one additional chance to take the examination. If I do not pass the exam on the second try, the State will not give me any credit for completion of basic police training, and should I become employed as a police officer in Ohio, I will have to repeat basic police training. _____

- continued -

Name: _____

26. Ohio Administrative Code Section 109:2-1-07 establishes the criteria for the Executive Director to issue a certificate of completion. School Commanders must inform all open enrollment students of the following provisions:

(A) Upon successful completion of an approved peace officer basic training course, a person appointed to a peace officer position described in section 109.71(A) of the Revised Code or a person employed in a position statutorily required to complete the basic training course, shall be awarded a certificate of completion by the executive director.

(B) A person successfully completing a basic course who is not a peace officer or who is not statutorily required to complete training and receive certification will be issued a letter of completion by the executive director.

(1) If within one year of the completion of training, the person receives an appointment as a peace officer or is employed in a position that statutorily requires a basic training certificate. A certificate of completion will be awarded provided no additional training requirements have been mandated. If additional training requirements have been mandated, this additional training must be completed before a basic training certificate is awarded.

(2) If more than one year but less than two years after completion of training, a person receives an appointment as a peace officer or obtains employment in a position that statutorily requires peace officer certification, the person shall attend the refresher course prescribed by the executive director before the person may perform the functions of a peace officer. Upon completion of the prescribed refresher course, a certificate of completion of basic training will be awarded. If the person does not complete the refresher course within one year of the appointment date, the person shall not be eligible to receive a certificate and will be required to repeat the entire basic training course.

(3) If more than two years after completion of training a person does not receive an appointment as a peace officer, the person shall successfully complete the peace officer basic training course before he or she may perform the functions of a peace officer.

(4) If a member of the National Guard or a military reservist is mobilized to active duty in the uniformed services after completion of training and prior to appointment as a peace officer, the time in active duty in the uniformed services shall not be included in calculating the period of time after completion of training for purposes of paragraphs (B) (2) and (B) (3) of this rule. _____

27. I understand the completion of the academy program does not empower me to carry a firearm or any other weapon, nor does it allow me to function as a police officer until hired by a governmental agency or police department. _____

28. I understand that any and all financial obligations relative to tuition and fees related to this course and owed to the college by me or my sponsor must be fully satisfied prior to last official academy class. _____

Name: _____

29. I understand that as a cadet in the Lakeland Community College Police Academy, smoking on Lakeland Community College property or any other training facility utilized by the Lakeland Community College Basic Police Academy is strictly prohibited. A violation of this policy may result in dismissal from the Lakeland Community College Basic Police Academy. _____

30. I understand that there are absolutely **no** refunds; whether I withdraw, be dismissed, or due to injury. _____

I understand that falsification of any of the information required on this form may result in dismissal from the Lakeland Community College Basic Police Academy, and may result in my being charged with a criminal offense pursuant Ohio Revised Code 2921.13.

Applicant Signature _____

_____ Date

State of _____

County of _____

On this the _____ day of _____, 20____ before me, _____
(Notary Public name) The undersigned Notary Public, personally appeared

_____,
who provided me with the satisfactory evidence to be the person whose name is subscribed in this document, and acknowledged that he/she executed it. Witness my hand and official seal.

Signature Notary Public _____

Notary Public Seal

Notary Public, State of _____

My commission expires: _____

Felony Convictions and Weapons Under Disabilities

The School Commander must inform each prospective student of the following:

- 14.1** No person convicted of a felony may attend any portion of the Peace Officer Basic Training program. This includes felonies that were sealed or expunged by court order.
- 14.2** As part of the enrollment process, a BCI and FBI criminal record check will be conducted on every prospective student. Records that have been expunged or sealed by court order will be opened and reviewed for purposes of attendance in Peace Officer Basic Training and for purposes of appointment as a peace officer.
- 14.3** If the criminal record check reveals a disqualifying arrest or conviction, the OPOTC will notify the student. The student must then submit a certified copy of the final journal entry showing the level of conviction or arrest also will be required. The student must submit the certified copy of the journal entry to the OPOTC Executive Director, who then will consider the matter and issue a letter of determination of eligibility to the student and School Commander.
- 14.3** If the criminal record check reveals a disqualifying arrest or conviction, the OPOTC will notify the student. The student must then submit a certified copy of the final journal entry showing the level of conviction and disposition of the case. If the record has been sealed or expunged, the court order sealing the record of conviction or arrest also will be required. The student must submit the certified copy of the journal entry to the OPOTC Executive Director, who then will consider the matter and issue a letter of determination of eligibility to the student and School Commander.
- 14.4** Prospective students subject to a state or federal weapons disability may not participate in any practical portion of the firearms training, or any classroom training that involves the handling of a firearm, unless and until relieved of the disability. A "yes" answer to any of questions 1 through 18 on the OPOTC Statement of Understanding, SF101unv, will act as a prohibition from the student participating in any practical portion of firearms training or any classroom training that involves the handling of a firearm unless and until the weapons disability issue has been favorably resolved. School Commanders and instructors are responsible for enforcing this rule.
- 14.5** School Commanders must take reasonable measures to ensure students possess a valid driver's license with operational privileges to participate in any practical portion of driving training. School Commanders and instructors are responsible for enforcing this rule. School Commanders also must maintain documents evidencing their efforts, which must be available for review by OPOTC staff upon request.

Applicant's Signature

Date

Signature of Notary Public

Applicant's Printed Name

Notary Public, State of _____
My commission expires: _____

Notary Public Seal

This form **MUST** be signed and notarized, and turned in with the completed application packet.

On February 19, 2010, the Court of Appeals for the First Appellate District of Ohio in *State v. Robinson*, 2010-Ohio-543, determined that a minor-misdemeanor violation of Ohio Revised Code Section 2925.11 (possession of a drug of abuse, to include marijuana) creates a disability prohibiting the possession of a firearm by state standards, unless the person convicted has been relieved from disability. Accordingly, Peace Officer Basic Training candidates who have previously been convicted of minor-misdemeanor possession will be barred from participating in the academy, unless the disability is relieved by court order.

Have you ever been convicted of a minor-misdemeanor of a drug possession statute? If yes, indicate court of record and attach a copy of court disposition. If you have been convicted of a minor-misdemeanor drug possession/use offense you must provide the academy with a release from disability from the court of jurisdiction.

Failure to disclose a minor-misdemeanor or any drug possession/use conviction may result in your dismissal from the Lakeland Community College Basic Police Academy and criminal prosecution for weapons on disability.

I understand that falsification of any of the information required on this form may result in dismissal from the Lakeland Community College Basic Police Academy, and may result in my being charged with a criminal offense pursuant Ohio Revised Code 2921.13.

Applicant Signature

Date

State of _____

County of _____

On this the _____ day of _____, 20____ before me, _____ (Notary Public name) The undersigned Notary Public, personally appeared

_____,
provided me with the satisfactory evidence to be the person whose name is subscribed this document, and acknowledged that he/she executed it. Witness my hand and official seal.

Signature Notary Public

Notary Public Seal

Notary Public, State of _____

My commission expires: _____

OPOTC BPA DISQUALIFYING OFFENSES

I understand the following:

- If I have ever been convicted of a felony, even if the conviction has been sealed or expunged; a misdemeanor charge of domestic violence or any related offense occurring as a result of a domestic violence incident; any misdemeanor crime that has, as an element of that crime, the use or attempted use of physical force, or the threatened use of a deadly weapon where the victim was a current or former spouse, child, guardian, a person who shares a child in common, a person who is or has cohabitated as a spouse, child, or ward, or a person similarly situated to a spouse, child, or ward; or any other offense creating a weapons disability under state or federal law (such as ORC 2923.13 or 18 USC 922), I may not be permitted to participate in the OPOTC program, and may not be eligible for reinstatement. While a felony conviction, even one that is sealed or expunged, prohibits me from attending any portion of a Peace Officer Basic Training Academy, the other above-noted matters prohibit me from firearms possession/training only, and if I choose to continue with the Academy while I try to get that matter sealed, I continue at the risk that I may ultimately not be permitted to take firearms and/or receive an Ohio Peace Officer Training Commission certification.
- In certain situations, juvenile adjudications regarding similar matters may also result in a disqualification.
- For the duration of the OPOTC program, I must immediately report to my Commander any criminal or juvenile delinquency charges filed against me.
- If I am charged with any of the above crimes or adjudications, I may be suspended from the training program until that criminal or juvenile case is adjudicated and complete, and only then may I be considered for reinstatement.

Applicant's Signature

Date

Witness Signature

NOTICE TO OPEN ENROLLMENT STUDENTS

Ohio Administrative Code Section 109:2-1-07 establishes the criteria for the Executive Director to issue a certificate of completion. School Commander must inform all open enrollment students of the following provisions:

- (A) Upon successful completion of an approved peace officer basic training course, a person appointed to a peace officer position described in section 109.71(A) of the Revised Code or a person employed in a position statutorily required to complete the basic training course, shall be awarded a certificate of completion by the executive director.
- (B) A person successfully completing a basic course who is not a peace officer or who is not statutorily required to complete training and receive certification will be issued a letter of completion by the executive director.
 - (1) If within one year of the completion of training, the person receives an appointment as a peace officer or is employed in a position that statutorily requires a basic training certificate. A certificate of completion will be awarded provided no additional training requirements have been mandated. If additional training requirements have been mandated, this additional training must be completed before a basic training certificate is awarded.
 - (2) If more than one year but less than two years after completion of training, a person receives an appointment as a peace officer or obtains employment in a position that statutorily requires peace officer certification, the person shall attend the refresher course prescribed by the executive director before the person may perform the functions of a peace officer. Upon completion of the prescribed refresher course, a certificate of completion of basic training will be awarded. If the person does not complete the refresher course within one year of the appointment date, the person shall not be eligible to receive a certificate and will be required to repeat the entire basic training course.
 - (3) If more than two years after completion of training a person does not receive an appointment as a peace officer, the person shall successfully complete the peace officer basic training course before he or she may perform the functions of a peace officer.
 - (4) If a member of the National Guard or a military reservist is mobilized to active duty in the uniform services after completion of training and prior to appointment as a peace officer, the time in active duty in the uniformed services shall not be included in calculating the period of time after completion of training for purposes of paragraphs (B) (2) and (B) (3) of this rule.

Applicant's Signature Date

Applicant's Printed Name

Signature of Notary Public

Notary Public, State of _____
My commission expires: _____

Notary Public Seal

This form **MUST** be signed and notarized, and turned in with the completed application packet.

NOTE TO NOTARY: Applicant is attesting to reading and understanding the Certification Criteria.

Financial Aid Opportunities for Basic Police Academy Students

Lakeland provides several options for our students, including loans and scholarships. Funding is limited and first priorities will be based on financial need and/or career development needs. Funds available typically are not sufficient to cover the entire cost of the academy.

Andy Nowacki Memorial Scholarship Endowment

Students who meet and comply with all admission requirements at Lakeland Community College and are enrolled in public service programs such as: Law Enforcement, Police Academy, Criminal Justice, Fire Science, Emergency Medical Technology – (EMT) paramedic's certificates/programs.

Complete the confidential Financial Aid Opportunities application

Joe DeFazio Scholarship

Restricted to Ashtabula County Residents.

Complete the confidential Financial Aid Opportunities application

John D. Grampa Family Endowed Scholarship

Students must demonstrate they are pursuing a career in law enforcement.

Complete the confidential Financial Aid Opportunities application

Mark E. Parisi Memorial Scholarship

Student be accepted into and enrolled in the Basic Police Academy

Complete the confidential Financial Aid Opportunities application

Jason Gresko Memorial Scholarship

Complete the confidential Financial Aid Opportunities application

Jason Gresko was born February 2, 1980. He was known as a kind, funny and ambitious kid. He loved to watch and participate in sports. Jason grew up in Eastlake, Ohio, had four siblings, graduated from Eastlake North High School in 1999, and received his OPOTA Certificate in 2002 from Cuyahoga Community College's Police Academy. Jason expressed an early interest in becoming a Police officer and was an active member of the Police Academy Athletics League (AL). His first job in the field was with the Village of Timberlake in 2002. He was hired by the Willoughby Police Department in 2003, and continued to work their part-time after he was hired by the Cleveland Clinic Police Department in 2006. Jason got married in 2004, and welcomed a daughter into the world in 2010. She was daddy's little girl and he made sure everyone knew it. Jason was a devout husband, father, son and brother. He was a true family man that loved to travel, be outdoors and watch his brother play high school football. He was dedicated and proud of his profession, but at the end of the day, he couldn't wait to get home to his two girls. On Friday, September 21, 2012, at age 32, Jason was killed in the line of duty while responding to a call to assist another officer. His cruiser collided with a pick-up truck driven by a

drunk driver who turned in front of him. Jason swerved to avoid the truck, but spun into a tree and was killed instantly. He is a hero. Jason sacrificed his life so that the four occupants of the picked up truck were uninjured.

Eligibility Criteria:

Recipients must be full-time or part-time students of Lakeland Community College's Basic Police Academy.

Charles E. Schell Foundation Student Loan Program

To be considered for the loan you must meet the following criteria:

- Citizens of Ohio, Kentucky, West Virginia or adjoining states, with parents of moderate means who are citizens of such states;
- Between the ages of 18 and 25;
- Loyal to the United States and its institutions, including the Army, Navy and Air Force;
- Honest, upright, intelligent and of practical appearance, and
- Maintaining a minimum 2.0 GPA on a 4.0 scale.

Terms of the loan:

- Payment of this loan will begin upon departure from Lakeland Community College or completion of stated program (whichever comes first);
- There is a maximum of 10 years to repay the loan;
- The loan will be interest free throughout its life.

To apply, complete the Charles E. Schell Foundation Student Loan Program Request Form.

Continuing Education Scholarship (noncredit)

- Applicants must intend to register for non-credit course at Lakeland Community College
- Applicant will be judged on the basis of the criteria as set forth by the donor
- Only one scholarship will be awarded per person per semester in the amount of \$100

Several options are available for our students, including direct scholarships. Funding is limited and priorities will be based on financial need and career development related programs.

Financial Aid Opportunities Application Requirements:

Complete the confidential Financial Aid Opportunities application *as well as the Lakeland Foundation application*

- Submit a brief written explanation of need in the body of the application (enclosed) and address the following areas where appropriate
Explain why you need financial help to attend Lakeland Community College's Basic Police Academy;
Your reasons for wanting to attend Lakeland's Basic Police Academy
Your career or job aspirations or goals;
Your participation in volunteer or service projects in the community;
Unusual expenses or circumstances.

How to Submit the Application for the Financial Aid Opportunities (noncredit):

- Completed applications must be turned in at the Part-Time Faculty Office – A2130, Lakeland Community College, 7700 Clocktower Dr., Kirtland, OH 44094 by **January 2, 2017**, for the Basic Police Academy;
- All applications will be considered if submitted by the deadline;
- An incomplete application will automatically disqualify the applicant.

Notification of Scholarship:

All applicants will be notified by letter whether or not they have been awarded any funding.

Alternative loans

We encourage future cadets to seek out additional funding through your personal banks.

Veterans who are seeking **VA Educational Benefits**, should contact Terri Dietz at 440-525-7246, email: tdietz@lakelandcc.edu or Lakeland's Veterans Website: www.lakelandcc.edu/veterans to make an appointment to apply for benefits.

Students who have graduated from the Criminal Justice program at Lakeland Community College are eligible for a 10% discount towards payment for the Basic Police Academy.

For more information regarding **Tuition Assistance** go to:

<http://www.military.com/money-for-school/tuition-assistance/tuition-assistance-ta-program-overview>

Each service has its own criteria for eligibility, obligated service, application process and restrictions. This money is usually paid directly to the institution by the individual services.

The deadline to apply for scholarship or financial aid is January 2, 2017.

Note: Certain questions relate to the requirements for specific scholarships. Incomplete applications will not be considered.

Name of Class: Lakeland Basic Police Academy Start of Class: 3/2017 Cost :		
<input type="checkbox"/> In County: \$4,500 <input type="checkbox"/> Out of County: \$4,900		
Name		Lakeland ID#:
Address	City	Zip
		Home Phone
		Work Phone
Last School or College Attended In what city did you live while attending this school?		Last Grade Level Completed
For Federal Government Reporting, please check: <input type="checkbox"/> White/Non-Hispanic <input type="checkbox"/> Black/Non-Hispanic <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Other		
Gross Monthly Income _____ Source of Income _____ Do you receive tuition reimbursement? <input type="checkbox"/> Yes <input type="checkbox"/> No Other resources for college expenses: <input type="checkbox"/> Savings _____ <input type="checkbox"/> VA Benefits _____ <input type="checkbox"/> Other _____		
Do you live with your parents? <input type="checkbox"/> Yes (Provide information below) <input type="checkbox"/> No (Provide Information Below) Parents' Marital status <input type="checkbox"/> Single <input type="checkbox"/> Married Marital status <input type="checkbox"/> Single <input type="checkbox"/> Married Parents' number of dependant children ____ Your number of dependent children ____ Father's gross monthly income _____ Spouse's monthly income _____ Mother's gross monthly income _____		
Explanation of Need: (Please attach additional typed page explaining the following): <ul style="list-style-type: none"> • Explain why you need financial help to attend the Police Academy • Your reasons for wanting to attend the Police Academy • Your career and job aspirations or goals • Your participation in volunteer or service projects in the community • Unusual expenses or circumstances 		
Your Signature gives the Financial Aid Office and/or The Lakeland Foundation permission to release your scholarship application and grade transcripts to a donor and/or a Scholarship Committee. It also gives permission to publicize your name as a recipient of a scholarship.		
Signature of Applicant:		Date:

016LCC

Lakeland ID Number

--	--	--	--	--	--	--	--

Last Name

First Name

To be considered for the loan, you must meet the following criteria:

- Citizens of Ohio, Kentucky, West Virginia or adjoining states, with parents of moderate means who are citizens of such states
- citizens of such states
- Between the ages of 18 and 25
- Loyal to the United States and its institutions, including the Army, Navy, Air Force, Marines and National Guard
- Honest, upright, intelligent and of practical appearance
- Maintaining a minimum 2.0 GPA on a 4.0 scale

Terms of the loan:

Payment of this loan will begin 60 days from the date of the signed promissory note. There is a maximum of 3 years to repay the loan. The loan will be interest free throughout its life.

If you meet all of the above conditions and agree with the terms of the loan, please complete the following:

Printed Name _____

Address _____

City _____ State _____

Zip _____

Date of Birth: _____

I am requesting \$_____ for the Basic Police Academy.

Complete page 2

I need these funds from the Charles E. Schell Foundation for the following reason(s):

Please explain how you plan to repay this loan?

(Use additional paper if necessary)

I certify that the information provided on this application is true. I understand that any information that is false or misleading will result in the loss of these funds and payment in full will be due immediately.

Signature _____

Date _____

=====

For Office Use Only
Approved _____ Denied _____ FAO init & Date _____
Reason(s): _____

FINGERPRINTING

Fingerprinting will be conducted at the:

Lake County Sheriff's Office
84 North Street
Painesville, OH 44077
440-350-5676 or 5858

HOURS:

Monday, Tuesday, Wednesday
8:00-4:00 p.m.

Thursday, Noon to 6:00 p.m.

Closed on Friday, Saturday, and Sunday.

NOTE: They are also closed between 12-12:30 p.m. for lunch break!

PLEASE BRING YOUR OPOTA FORM SF102, YOUR LAKELAND RECEIPT AND DRIVER'S LICENSE WITH YOU TO THE FINGERPRINTING APPOINTMENT.

*****Fingerprinting must be completed between February 12 – March 9, 2017.**

After you have been fingerprinted, please turn in the completed form (SF102) to Carole Dunkelberg at Lakeland Community College in the Part-Time Faculty Office, A2130, before March 6, 2017.

Any questions, please call Carole at 440-525-7185.



**Basic Police Academy 2017
Waiver of Liability and Indemnity
Agreement**

Due to the nature of the course(s) and training offered to students in the Lakeland Community College Police Academy ("Academy"), there are risks and dangers associated with the courses or training. Some of these risks are inherent to the nature of the course or training and all risks and dangers can cause physical and/or emotional injury, disability or death. All students enrolled in any Academy Course or Program are hereby advised that the Academy will provide instruction only and assumes no other responsibility to a student.

Prior to being granted permission to attend the Academy, I acknowledge the following:

1. I have obtained and submitted a Medical Examination and Approval Form prior to enrollment.
2. I declare myself to be in good physical and mental health and acknowledge that I do not have a temporary or permanent injury, illness or condition, including pregnancy, which could be endangered, potentially cause me harm, or be negatively impacted by my participation in the Academy.
3. If I have such an injury, illness or condition, I acknowledge that I assume all risk and responsibility for any worsening of or harm caused by my participation in the Academy.
4. If I develop any such condition during my participation in the Academy, I agree to promptly notify my commander, instructor, and school and resubmit a Medical Examination and Approval Form in order to continue participation in the Academy.

In consideration of Lakeland Community College permitting my participation in the Academy, I agree and am bound to the following:

1. I acknowledge and accept that there are risks involved with my participation in the Academy.
2. I am voluntarily participating in the Academy and in consideration of my participation, I, on behalf of myself, my heirs, assigns, executor, administrator and representatives do hereby release and hold harmless, Lakeland Community College, its trustees, officers, agents, instructors, and employees from any responsibility or liability for any and all loss and claims of damages, either personal or property, incurred while a participant in the Academy.
3. I shall abide by all policies, safety rules and instructions given in conjunction with my participation in the Academy.
4. I agree that any certification I receive from my participation in the Academy is contingent on passing all applicable tests.

I have fully read and understand this agreement and acknowledge that this agreement contains a waiver of liability, an assumption of risk, and a release and indemnification of the Releases. I sign this agreement voluntarily.

Student Signature

Name Printed

Date

Witness Signature

Name Printed

Date



**Basic Police Academy 2017
Drug Screening Acknowledgement**

I hereby consent to submit to a drug screen and to furnish a sample of my urine for analysis to a testing facility designated by the commander in order to be eligible to attend peace officer basic training.

I further authorize and give full permission to have the laboratory or other testing facility release any and all documentation relating to such screen to the above listed commander or designee. I further agree to and thereby authorize the release of the results of said tests to the commander, their designee, or the Ohio Peace Officer Training Commission (OPOTC).

I understand that my sample will be screened for the following substances and concentrations.

Initial test analyte	Initial test cutoff concentration	Confirmatory test analyte	Confirmatory test cutoff concentration
Marijuana metabolites	50 ng/mL	THCA	15 ng/mL
Cocaine metabolites	150 ng/mL	Benzoylcgonine	100 ng/mL
Opiate metabolites- Codeine/Morphine	2000ng/mL	Codeine Morphine	2000 ng/mL 2000ng/mL
6-Acetylmorphine	10 ng/mL	6-Acetylmorphine	10 ng/mL
Phencyclidine	25 ng/mL	Phencyclidine	25 ng/mL
Amphetamines	500 ng/mL	Amphetamine Methamphetamine	250 ng/mL 250 ng/mL

I understand that a positive result for drugs, or my refusal to authorize the tests by signing this form, take the specified test(s), or failure to produce a specimen, may preclude me from attending this academy.

I understand that I must provide proof within 72 hours that I am taking a controlled substance as directed pursuant to a lawful prescription issued in my name if that substance causes a positive result.

I understand that the OPOTC certified school is not a covered entity and is not subject to the privacy requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). I understand that there is a potential that information disclosed to the OPOTC certified school may be subjected to redisclosure by the OPOTC certified school, and not protected from such redisclosure by federal law or federal rule.

I understand that I may revoke this authorization in writing submitted at any time to the OPOTC certified school except to the extent that action has been taken in reliance on this authorization. If this authorization has not been revoked, it will terminate two years from the date of my signature.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act and that I have not been coerced into signing this document.

APPLICANT:

Signature: _____ Date: _____



Patient/Employee Name _____
Job Title/Category: _____

Acct: 2162

Employer Name Lakeland Police Academy
Date _____

Police Academy Candidates Employee to pay at time of service
Employer - Please check boxes for services required

Physical Examination - call 855-525-3622 to schedule appointment

- Pre-placement Annual Return to Work

DOT Physical Examination - call 855-525-3622 to schedule appointment

- Initial Recertification

Special Physical Examination - call 855-525-3622 to schedule appointment

- Respirator Clearance Asbestos Fit Testing (needs mask)
 JPA/FCE OSHA Audio Retest Other _____

Drug and Alcohol Testing - walk in testing available

- Urine Drug Screen Alcohol Drug - Collection Only
 DOT Breath
 Non-DOT 89710 Urine Hair/RIAH
 Synthetic Marijuana/K2/Spice
 Bath Salts

Reason for Drug & Alcohol Testing

- Preplacement Random Reasonable Suspicion
 Post Accident Follow Up Return to work

Other Testing - walk in testing available

- Fingerprinting TB Testing _____
 BCI 1 Step (PPD)
 FBI 2 Step
 BCI/FBI T-Spot
 Lift Test Maximum Wt: _____ lbs
 Respirator Questionnaire Review

Special Instructions/comments: _____
Job Description for physical: _____

****Due to the nature of these specific services, only the patient and staff are allowed in the testing area. Please alert your employee so that they can make arrangements for children or others that might otherwise be accompanying them to the medical facility.

Authorized by: _____ Date: _____
Print Name and Sign



Occupational Services Department Located at
7956 Tyler Blvd, Mentor, Ohio 44060
Phone: 855-LAKE-OCC (855-525-3622) or 440-354-1990
Fax: 440-639-4379

Service Locations: **Call 855-LAKE-OCC (855-525-3622) to schedule all physicals**

Lake County

Tyler Urgent Care

7956 Tyler Blvd.
Mentor, Ohio 44060
Phone: 440-255-6400
Fax: 440-255-3637
Hours: Monday-Friday: 8 am to 9 pm
Saturday/Sunday: 9 am to 5pm

Willowick Campus

29804 Lakeshore Blvd.
Willowick, Ohio 44095
Phone: 440-585-3322
Fax: 440-585-1962
Hours: Monday-Friday: 8 am to 9 pm
Saturday/Sunday: 9 am to 5pm

Madison Quick Care Clinic

6270 North Ridge Road
Madison, Ohio 44057
Phone: 440-428-8256
Fax: 440-428-8220
Hours: Monday-Friday 8 am to 7:30 pm
Saturdays: 9 am - 5 pm

Painesville Quick Care Clinic

74 South Park Place **No Drug Testing**
Painesville, Ohio 44077 **No Web Check**
Phone: 440-354-3887 **No X-ray**
Fax: 440-354-4071
Hours: Monday-Friday: 9 am to 5 pm

Geauga County

Chardon Medical Campus

510 5th Avenue
Chardon, Ohio 44024
Phone: 440-279-1525
Fax: 440-279-1527
Hours: Monday-Friday: 8 am to 8 pm
Saturday/Sunday: 9 am-5 pm



MIKE DEWINE

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STUDENT DISCLOSURES AND STATEMENT OF UNDERSTANDING

Student Name: _____
(Last) (First) (Middle Initial)

Student SSN: _____ Student DOB: _____

School Name: Lakeland Community College School Number: _____

Please answer the following questions by checking either "Yes" or "No:"

1. Have you ever been convicted of a felony offense in any jurisdiction, including any conviction that has been sealed or expunged? (If so, you may not attend any portion of a Peace Officer Basic Training Academy.) _____ YES _____ NO
2. Are you a fugitive from justice? _____ YES _____ NO
3. Have you ever been convicted of a felony offense of violence as defined in ORC 2901.01 _____ YES _____ NO
4. Have you ever been adjudicated a delinquent child for the commission of an offense that, if committed by an adult, would have been a felony offense of violence? _____ YES _____ NO
5. Have you ever been convicted of any felony offense involving a drug of abuse? _____ YES _____ NO
6. Have you ever been adjudicated a delinquent child for the commission of an offense that, if committed by an adult, would have been a felony offense involving a drug of abuse? _____ YES _____ NO
7. Are you drug dependent, in danger of drug dependence, or a chronic alcoholic? _____ YES _____ NO
8. Are you under adjudication from any court for mental incompetence? _____ YES _____ NO
9. Have you been adjudicated by a court as a mental defective? _____ YES _____ NO
10. Have you been committed by a court to a mental institution? _____ YES _____ NO
11. Have you been found by a court to be a mentally ill person subject to hospitalization by court order, or have you been an involuntary patient other than one who is a patient only for purposes of observation? _____ YES _____ NO
12. Have you been ever been convicted of a crime that had a possible sentence of more than one year? _____ YES _____ NO
13. Are you an alien, illegally or unlawfully in the United States? _____ YES _____ NO
14. Have you been discharged from the Armed Forces under dishonorable conditions? _____ YES _____ NO
15. Have you renounced your United States citizenship? _____ YES _____ NO
16. Are you under a court order that restrains you from harassing, stalking, or threatening an intimate partner or the child of such intimate partner, or engaging in other conduct that would place an intimate partner in reasonable fear of bodily injury to the partner or child? _____ YES _____ NO
- 17a. Have you been convicted of a misdemeanor crime of domestic violence? _____ YES _____ NO
- 17b. Have you been convicted of a misdemeanor crime that has, as an element of that crime, the use or attempted use of physical force, or the threatened use of a deadly weapon? _____ YES _____ NO
If yes, please explain your relationship with the victim (stranger, present or former spouse, household member, child, other family member, other – please describe). _____

- 17a. Have you been convicted of a misdemeanor crime of domestic violence? _____ YES _____ NO
- 17b. Have you been convicted of a misdemeanor crime that has, as an element of that crime, the use or attempted use of physical force, or the threatened use of a deadly weapon?
If yes, please explain your relationship with the victim (stranger, present or former spouse, household member, child, other family member, other – please describe). _____ YES _____ NO
-
18. Do you currently have criminal charges pending in any jurisdiction? _____ YES _____ NO
19. Do you currently possess a valid driver's license and have driving privileges in the state of Ohio? _____ YES _____ NO
- 20a. Have you been awarded and do you possess a high school diploma? _____ YES _____ NO
- 20b. If you answered no to 20a, have you been awarded and do you possess a certificate of high school equivalency? (Explain.) _____ YES _____ NO
-

I ACKNOWLEDGE AND UNDERSTAND THE FOLLOWING:

1. **If I provide false information on this form I may be discharged from this school, and may be charged with a crime.**
2. **If a criminal or delinquency charge is filed against me while I am a student of this school, I MUST report it to the Commander immediately**
3. **If I am charged with any offense that may result in a felony conviction or in a state or federal weapons disability, I may be suspended from this school until the case is complete, and at that time, my ability to be reinstated to the school would be re-examined.**
4. **If I am convicted of a felony offense or one that results in a state or federal weapons disability, I may be ineligible to attend the school.**
5. **I hereby grant OPOTC consent to disclose to the Commander information regarding any and all of my criminal or delinquency history information that might impact my ability to participate as a student in an OPOTC-approved school.**

I have carefully read this document and fully understand its contents and I sign it of my own free will and volition. I attest that the information provided on this document is true and correct and is based on my personal knowledge or inquiry. I further understand and acknowledge that submission of falsified records is a criminal violation.

Signature

Printed Name (First, Middle, & Last Name)

Date

Witness Signature

Witness Printed Name (First, Middle, & Last Name)

Date



MIKE DEWINE

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REQUEST FOR NATIONAL WEBCHECK®

All information must be typed or printed.

This completed form is to be returned to the commander by the student.

INSTRUCTIONS TO NATIONAL WEBCHECK® FACILITY

- Transaction Type is both BCI and FBI.
- Reason Fingerprinted is "Law Enforcement Employment" or "Law Enforcement/Criminal Justice" for BCI and "Law" for FBI.
- This is a **Direct Copy** transaction to the Ohio Peace Officer Training Academy (OPOTA). No address needs entered.

TO BE COMPLETED BY STUDENT

I am scheduled to attend an Ohio Peace Officer Training Commission-approved Program to be held at:

Lakeland Community College beginning on March 20, 2017.
(Academy Name) (Date)

As part of the enrollment process, the OPOTC requires that I have a criminal record background check conducted within 90 days of the above date by the Ohio Bureau of Criminal Identification (BCI) and the Federal Bureau of Identification (FBI). Therefore, I am requesting a National WebCheck®, 10-digit, for law enforcement purposes.

Name: _____
(Last) (First) (Middle Initial)

Alias: _____

Date of Birth: _____ Social Security Number: _____

Address (including P.O. Box, if applicable): _____

City: _____ State: _____ Zip Code: _____

Name of Fingerprinting Agency: _____

Signature of Person Being Fingerprinted: _____ Date Fingerprinted: _____



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OPOTC STUDENT WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

I understand the following:

The Ohio Peace Officer Training Commission (OPOTC) provides class curriculum and assumes no responsibility other than the opportunity to learn under supervision. OPOTC, the Attorney General's Office, the State of Ohio, and its employees and agents are hereby relieved of all liability. Some risks are inherent in the nature of the training courses and cannot be eliminated or reduced. These inherent and other risks, hazards, and dangers can cause physical or emotional injury, disability or death. **I understand and agree, as evidenced by my signature below, that I am participating in this training course at my own risk.**

Therefore, prior to attending the class, I acknowledge the following:

1. I have received a medical examination and medical approval signed by a medical doctor (MD), osteopath (DO), physician's assistant (PA), or certified nurse practitioner (CNP), licensed by the Ohio State Medical Board or the Ohio State Board of Nursing, or a neighboring state's equivalent, or a medical professional with the US Department of Veterans' Affairs.
2. I understand that the training involves a degree of physical exercise and physical contact, which involves a risk of injury to me.
3. I will have to endure some degree of discomfort or pain during the application, instruction or demonstration of certain techniques and/or certain practice sessions.
4. I do not have any of the following conditions: pregnancy, chronic/acute problems of the neck, back, wrist, knee, heart or muscular system, or other medical conditions such as stress disorder, hypertension (high blood pressure), hip bursitis or other injuries, illnesses, disabilities or conditions which could be made worse by participation or otherwise cause me harm during this training.
5. If I develop or am diagnosed with any such illness, injury, condition, disability, or condition during the course of the training program, I shall promptly notify my Commander, instructors, and school and resubmit to a medical examination and obtain approval from a medical provider acceptable to OPOTC in order to continue to participate in training.
6. I am in good physical and mental health.
7. I agree to abide by the course safety rules and instructions given by the instructors.
8. I agree that to receive a certificate for this training I must pass ALL applicable tests.

In consideration of OPOTC allowing me to participate in the training class, I hereby agree to the following:

1. Having read and understood the above statements, I accept all risks that may be associated with this training.
2. I waive any and all claims that I may have against OPOTC, the Attorney General's Office, the State of Ohio, and its employees and agents, including but not limited to any and all liability claims or demands for personal injury, sickness, or death, as well as property damages and expenses, of any nature whatsoever which may be incurred while participating in the above referenced program or in any medical procedure arising out of or related to my participation in such program, including but not limited to any training conducted at the school and at any and all state training locations from any cause whatsoever, including any claims or demands based upon negligence.
3. I release OPOTC, the Attorney General's Office, the State of Ohio, and its employees and agents, from any and all liability, and I further agree to indemnify the OPOTC, the Attorney General's Office, the State of Ohio, and its employees and agents, from any loss, liability, damage, or cost, including reasonable attorneys fees, that may occur due to my participation in the above referenced program or in any medical procedure arising out of or related to my participation in such program, whether or not such loss, liability, damage, or cost results from the negligence or other action, except intentional acts.
4. I understand and intend that this release of liability shall be effective and binding upon my heirs, next of kin executors, administrators and assigns in the event of my death.

I have carefully read this agreement and fully understand its contents. I am aware that the agreement contains a waiver of liability, an assumption of risk, and an agreement by me to release and indemnify OPOTC, the Attorney General's Office, the State of Ohio, and its employees and agents and I sign it of my own free will and volition.

Student Signature: _____ Printed Name (including middle): _____ Date: _____

Witness Signature: _____ Printed Name of Witness: _____ Date: _____

School Name: Lakeland Community College



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Family Educational Rights and Privacy Act (FERPA)
 20 U.S.C. § 1232g; 34 CFR Part 99)
CONSENT TO RELEASE STUDENT INFORMATION

TO ADMINISTRATOR(S) AND/OR STAFF OF:
 Lakeland Community College

 (College or University that will release the educational records)

Please provide information from the educational records of:

 (Name of Student requesting the release of educational records)

to the Ohio Peace Officer Training Commission (OPOTC).

The information to be released under this consent includes any requested records, other than medical records held solely by Student Health Services or the Counseling Center. The information is to be released for the purpose of Ohio Peace Officer Commission oversight of, and communication regarding training programs related to Ohio Administrative Code Chapters 109:2-1 through 109:2-18.

I understand the information may be released orally or in the form of copies of written records, photographs, videos, electronic documents, or otherwise, as preferred by the requester. I have a right to inspect any written records released pursuant to this Consent. I understand I may revoke this Consent upon providing written notice to the Commander of the OPOTC-approved school with which I am or was associated and/or enrolled. I further understand that until this revocation is made, this consent shall remain in effect and my educational records will continue to be provided to the Ohio Peace Officer Training Commission for the purposes described above.

Student Name (print) _____

Signature _____

Student ID Number _____

Date _____



STUDENT ACKNOWLEDGEMENT FORM

Name: _____
 (Last) (First) (Middle Initial)

School Name: Lakeland Community College School Number: _____

1. Appointment Status. I understand the following: _____ [initials]

- I am a student in an Ohio Peace Officer Basic Training Commission (OPOTC) program.
- I am not yet a peace officer and that I may not perform the functions of a peace officer until I am appointed as officer and receive a certificate of successful completion from the OPOTC Executive Director.
- The OPOTC program enrolls both sworn officers (students who are already appointed as peace officers) and “open enrollment” students who do not yet have an appointment as a peace officer.
- I must immediately notify my Commander if my appointment status should change from open enrollment to sworn, or from sworn to open enrollment.
- Sworn cadets will, upon passing the state certification examination, receive a certificate of successful completion from the OPOTC Executive Director
- Open enrollment students will not receive a *certificate* of successful completion upon passing the state certification examination, but will instead receive a *letter* of completion from the Executive Director.
- Open enrollment students are subject to the following requirements:
 - If within one year of passing the state certification examination an open enrollment student receives an appointment as a peace officer or is employed in a position that statutorily requires a basic training certificate, a certificate of successful completion will be awarded, providing no additional training has been mandated. If additional training has been mandated, it must be completed before a certificate of successful completion is awarded.
 - If more than one year, but less than two years after passing the state certification examination, an open enrollment student receives an appointment as a peace officer or is employed in a position that statutorily requires a basic training certificate, the open enrollment student shall attend the refresher course and any additional training that has been mandated since passing the exam, before the student may perform the functions of a peace officer. Upon completion of the refresher course and mandated training (if any), a certificate of successful completion will be awarded. If the student does not complete the refresher course within one year of the appointment date, the student shall not be eligible to receive a certificate and will be required to repeat the entire basic training course.
 - If more than two years after passing the state certification examination, the open enrollment student has not received an appointment as a peace officer, the student shall again successfully complete an entire OPOTC course and examination before the student may perform the functions of a peace officer.

2. Disqualifying Offenses. I understand the following: _____ [initials]

- If I have ever been convicted of a felony, even if the conviction has been sealed or expunged; a misdemeanor charge of domestic violence or any related offense occurring as a result of a domestic violence incident; any misdemeanor crime that has, as an element of that crime, the use or attempted use of physical force, or the threatened use of a deadly weapon where the victim was a current or former spouse, child, guardian, a person who shares a child in common, a person who is or has cohabitated as a spouse, child, or ward, or a person similarly situated to a spouse, child, or ward; or any other offense creating a weapons disability under state or federal law (such as

is or has cohabitated as a spouse, child, or ward, or a person similarly situation to a spouse, child, or ward; or any other offense creating a weapons disability under state or federal law (such as ORC 2923.13 or 18 USC 922), I may not be permitted to participate in the OPOTC program, and may not be eligible for reinstatement. While a felony conviction, even one that is sealed or expunged, prohibits me from attending any portion of a Peace Officer Basic Training Academy, the other above-noted matters prohibit me from firearms possession/training only, and if I choose to continue with the Academy while I try to get that matter sealed, I continue at the risk that I may ultimately not be permitted to take firearms and/or receive an Ohio Peace Officer Training Commission certification.

- In certain situations, juvenile adjudications regarding similar matters may also result in a disqualification.
- For the duration of the OPOTC program, I must immediately report to my Commander any criminal or juvenile delinquency charges filed against me.
- If I am charged with any of the above crimes or adjudications, I may be suspended from the training program until that criminal or juvenile case is adjudicated and complete, and only then may I be considered for reinstatement.

3. Standards of Conduct. I understand the following: _____ [initials]

- The Ohio Peace Officer Training Commission is committed to maintaining an academic environment in which all individuals are treated with respect and dignity, free from any type of discrimination or harassment.
- In keeping with this commitment, OPOTC will not tolerate discrimination or harassment in an OPOTC program, whether committed by a student, an instructor, a commander, or another associated with the program.
- I must report incidences of suspected discrimination or harassment to my Commander and the OPOTC Executive Director, whether that suspected behavior involves a student, an instructor, or another associated with the program. If the suspected behavior involves a commander, I must report incidences of suspected discrimination or harassment to the academy's senior management and the OPOTC Executive Director.
- If a student has engaged in discrimination or harassment, the student may be suspended or expelled from the OPOTC program.

4. Attendance. I understand the following: _____ [initials]

- To be eligible to take the OPOTC state certification examination, I must have 100% attendance in every hour of every topic.
- If I have an excused absence for any topics hours, it is my obligation to make arrangements with Commander to make up the missed topic hours.
- If I complete make-up hours in another academy, I must attend the entire block of instruction for that topic.
- It is my obligation to make-up these topics/hours before the end of scheduled OPOTC topics.
- The Commander may set stricter requirements than these OPOTC minimum standards.

5. Notebook Requirements. I understand the following: _____ [initials]

- To be eligible to take the OPOTC state certification examination I must maintain a notebook during the OPOTC course. The notebook shall contain appropriate entries of pertinent material covered during the classroom sessions of the course.
- I must submit this notebook to the Commander for inspection at the conclusion of the program. It will be evaluated on its sufficiency of course content, organization, appropriateness of material, regularity of entries, neatness, accuracy, and legibility, and will be graded as either satisfactory or unsatisfactory by the Commander.
- To be eligible to take the OPOTC state certification examination, my notebook must be deemed satisfactory by the Commander.

6. Physical Fitness, Injuries and Illnesses. I understand the following: _____ [initials]
- While I am enrolled as a student in the OPOTC program, I must immediately notify my Commander of any injury, illness, or medical condition sustained or arising during training or arising outside of training.
 - To be eligible to take the OPOTC state certification examination I must successfully complete the OPOTC physical fitness assessment, consisting of sit-ups, push-ups, and a one and one-half (1 ½) mile run.
 - I have been informed by the Commander of the requirements for my age and gender, and I understand that I must meet these requirements in each event.
 - I understand that the OPOTC physical fitness assessment will be held within the last eighty (80) hours of scheduled OPOTC topics, and I understand that I will be given two (2) opportunities to meet the requirements.
 - If I fail any requirement during my first attempt, I must meet the requirements for all three (3) events (sit-ups, push-ups, and 1 ½ mile run) during the second attempt.
 - An unexcused absence from an assessment constitutes a failure of the OPOTC physical fitness assessment.
 - It is my obligation to notify my Commander before a scheduled assessment, if I suffer any illness, injury, or condition which might preclude my participation in the assessment.
 - If I suffer illness or injury during an attempt, the attempt will be counted as a failure.
 - If I wish to request an extension of time for an assessment for medical reasons, I must give the Commander a written excuse, signed by a medical doctor (MD), osteopath (DO), physician's assistant (PA), Certified Nurse Practitioner (CNP) licensed in Ohio, on a form prescribed by the OPOTC.
 - If I am granted an extension of time to complete the assessment I will receive a letter from the OPOTC Executive Director notifying me of the extension, and a deadline date for when I must complete the physical assessment.
 - If I am granted an extension of time to complete the assessment I must complete the make-up assessment and re-test, if necessary, before my extension expires, and it must be done so at the Ohio Peace Officer Training Academy in London, Ohio.

7. Certification Examination. I understand the following: _____ [initials]
- To be eligible to take the OPOTC state certification examination, I must first demonstrate to the satisfaction of my Commander the requisite proficiencies in each skills unit/topic.
 - I must pass the written OPOTC state certification examination with a score of at least 70% at the conclusion of this course.
 - If I do not pass on the first attempt, I will be given one additional opportunity to pass the examination.
 - I will not disclose any information concerning specific questions regarding the OPOTC state certification examination.
 - If I request any special accommodations (such as those relating to learning/reading disabilities, dyslexia, etc.) for this written examination, then at least forty-five (45) days before the last day of OPOTC topics, my Commander must submit written documentation supporting my request to the OPOTC.
 - If this request and documentation is not submitted by that time, I may be prevented from receiving an accommodation.

Student Signature

Date

School Commander/Witness Signature

Date



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STUDENT HEALTH DATA FORM

Name: _____ Age: _____ Sex: _____ Female _____ Male
(Last) (First) (MI)

School Name: Lakeland Community College School Number: _____

Do you have any physical or psychological limitations/injuries (recent or old) that might in any way restrict your full participation in physical activities during training?

_____ Yes _____ No If "yes," please describe: _____

(Student Signature)

(Date)

This section to be completed by medical professional (medical doctor (MD), osteopath (DO), physician's assistant (PA) or certified nurse practitioner (CNP)): This physical examination should ascertain any conditions which may preclude the student's ability to participate in, or which may be aggravated by, strenuous physical exercise. As a part of peace officer basic training, the student will engage in calisthenics, running, jumping, wrestling, unarmed self-defense, firearms, driving and other physically demanding exercises.

Height (without shoes): _____ feet _____ inches Weight: _____ pounds

Resting Pulse Rate: _____ beats per minute Blood Pressure: _____ / _____

Does the patient have a medical history of, or presently demonstrate symptoms of, any of the following?

- | YES | NO | | YES | NO | |
|-------|-------|--|-------|-------|---|
| _____ | _____ | 1. Uncorrected visual deficiency | _____ | _____ | 9. Dizziness/Fainting |
| _____ | _____ | 2. Major impairment of the senses | _____ | _____ | 10. Back/Neck injury or recurrent pain |
| _____ | _____ | 3. Asthma or Breathing difficulties | _____ | _____ | 11. Pregnancy |
| _____ | _____ | 4. Heart attack; Angina Pectoris | _____ | _____ | 12. Communicable diseases |
| _____ | _____ | 5. Stroke | _____ | _____ | 13. Amputation/Prosthetic devices |
| _____ | _____ | 6. Hemorrhage | _____ | _____ | 14. Bone/joint injury or recurrent pain |
| _____ | _____ | 7. Hypertension | _____ | _____ | 15. Taking medication |
| _____ | _____ | 8. Allergies (Drug, Environmental, Etc.) | _____ | _____ | 16. Under physician's continuing care |

Please note any other condition(s) not listed above which may affect the student's participation. Also please explain each "Yes" response above, indicating the item number:

As a result of my physical examination, I have determined that the student can, without limitation, safely function in all phases of strenuous physical training including, but not limited to, calisthenics, running, jumping, wrestling, unarmed self-defense, firearms, driving and a physical fitness assessment consisting of sit-ups, push-ups, and a timed 1.5 mile run.

Signature of Medical Professional

Typed/Printed Name

Title (MD, DO, PA, or CNP)

License Number

Issuing State

Address

Phone Number

City, State, ZIP

Date of Examination

**OHIO PEACE OFFICER TRAINING COMMISSION
STUDENT ENROLLMENT/CERTIFICATION RECORD**

TYPE OR PRINT LEGIBLY IN INK

NAME: _____ S.S.N. _____
Last First M.I.

HOME ADDRESS: _____
No./Street and/or P.O. Box City County Name State Zip

D.O.B. _____ PLACE OF BIRTH _____
City County State Or Country

STUDENT'S HOME PHONE: (____) _____ MALE _____ FEMALE _____

EMAIL: _____

OPERATOR'S LICENSE # _____ STATE _____ EXPIRATION DATE _____

THIS BLOCK NOT TO BE USED BY OPEN ENROLLMENT OR PRIVATE SECURITY STUDENTS:

APPOINTING /EMPLOYING AGENCY _____ PHONE # (____) _____

AGENCY ADDRESS _____
STREET #/ P.O. BOX City County State Zip

DATE OF APPOINTMENT/EMPLOYMENT _____ POSITION/TITLE _____

RACE:

____ CAUCASIAN ____ AFRICAN AMERICAN ____ NATIVE AMERICAN
 ____ HISPANIC/LATINO ____ ASIAN/PACIFIC ISLANDER ____ OTHER:

EDUCATION: Highest level attained _____

STUDENT STATUS:

PEACE OFFICER	<input checked="" type="checkbox"/> ENTIRE BASIC	<input type="checkbox"/> REFRESHER	<input type="checkbox"/> UPDATE	<input type="checkbox"/> PRIOR - EQUIVALENT
FULL-SERVICE FACILITY	<input type="checkbox"/> CORRECTION OFFICER	<input type="checkbox"/> PRIOR EQUIVALENT		
JAILER	<input type="checkbox"/> 12-DAY FACILITY	<input type="checkbox"/> SWORN P.O.	<input type="checkbox"/> CONTACT	<input type="checkbox"/> 12-HOUR FACILITY
PRIVATE SECURITY	<input type="checkbox"/> ACADEMIC	<input type="checkbox"/> REVOLVER	<input type="checkbox"/> SEMI AUTO PISTOL	<input type="checkbox"/> SHOTGUN <input type="checkbox"/> REQ
OTHER	<input type="checkbox"/> BAILIFF/ COURT OFFICER	<input type="checkbox"/> ADULT PAROLE AUTHORITY	<input type="checkbox"/> PROBATION	

 COMMANDER SIGNATURE DATE

Lakeland Community College
 SCHOOL NAME

 SCHOOL NUMBER

NO STAMPS/ORIGINAL SIGNATURE ONLY

OPOTC USE ONLY

Exam Date _____ Approval Date _____
 Certificate No. _____ Certification Officer's Initials _____
 Date Certificate Issued _____ Private Security:Requalification Due Date _____
 Last Date of Class _____



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London, OH 43140
www.OhioAttorneyGeneral.gov

Authorization for Use or Disclosure of Drug Screen Information

Applicant's Name: _____

Applicant's Date of Birth: _____

Commander: Chief Ronald Morenz

Commander's Address: 7700 Clocktower Drive, Kirtland, OH 44094-5198

I hereby consent to submit to a drug screen and to furnish a sample of my urine for analysis to a testing facility designated by the commander in order to be eligible to attend peace officer basic training.

I further authorize and give full permission to have the laboratory or other testing facility release any and all documentation relating to such screen to the above listed commander or designee. I further agree to and hereby authorize the release of the results of said tests to the commander, their designee, or the Ohio Peace Officer Training Commission (OPOTC).

I understand that my sample will be screened for the following substances and concentrations:

Initial test analyte	Initial test cutoff concentration	Confirmatory test analyte	Confirmatory test cutoff concentration
Marijuana metabolites	50 ng/mL	THCA	15 ng/mL
Cocaine metabolites	150 ng/mL	Benzoyllecgonine	100 ng/mL
Opiate metabolites - Codeine/Morphine	2000ng/mL	Codeine Morphine	2000 ng/mL 2000ng/mL
6-Acetylmorphine	10 ng/mL	6-Acetylmorphine	10 ng/mL
Phencyclidine	25 ng/mL	Phencyclidine	25 ng/mL
Amphetamines	500 ng/mL	Amphetamine Methamphetamine	250 ng/mL 250 ng/mL

I understand that a positive result for drugs, or my refusal to authorize the tests by signing this form, take the specified test(s), or failure to produce a specimen, may preclude me from attending this academy.

I understand that I must provide proof within 72 hours that I am taking a controlled substance as directed pursuant to a lawful prescription issued in my name if that substance causes a positive result.

I understand that the OPOTC certified school is not a covered entity and is not subject to the privacy requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). I understand that there is a potential that information disclosed to the OPOTC certified school may be subjected to redisclosure by the OPOTC certified school, and not protected from such redisclosure by federal law or federal rule.

I understand that I may revoke this authorization in writing submitted at any time to the OPOTC certified school except to the extent that action has been taken in reliance on this authorization. If this authorization has not been revoked, it will terminate two years from the date of my signature.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act and that I have not been coerced into signing this document.

APPLICANT:

Signature: _____ Date: _____



MIKE DEWINE

★ OHIO ATTORNEY GENERAL ★



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P.O. Box 309
London, OH 43140
www.OhioAttorneyGeneral.gov

BASIC TRAINING PHYSICAL ASSESSMENT FORM

School Name: Lakeland Community College School #: _____

Student's Name: _____
(Last) (First) (Middle)

Previous Name(s) or Alias: _____

Sex: _____ M _____ F DOB: _____ Age: _____

Initial Assessment Date: _____ Final Assessment Date: _____ Retest Date: _____

Status at Final Assessment: _____ Appointed _____ Open Enrollment

Age and Gender Minimum Scores					Initial Assessment	Final Assessment (Score/P-F)	Retest (Score/P-F)
	Males (<29)		Females (<29)				
	15%	50%	15%	50%			
Sit-ups (1 min.)	32	40	23	35			
Push-ups (1 min.)	19	33	9	18			
1.5 Mile Run	14:33	11:58	17:53	14:15			
Males (30-39)					# Sit-ups Completed	# Sit-ups Completed	# Sit-ups Completed
	15%	50%	15%	50%			
Sit-ups (1 min.)	28	36	18	27			
Push-ups (1 min.)	15	27	7	14			
1.5 Mile Run	15:14	12:25	19:01	15:14			
Males (40-49)					# Push-ups Completed	# Push-ups Completed	# Push-ups Completed
	15%	50%	15%	50%			
Sit-ups (1 min.)	22	31	13	22			
Push-ups (1 min.)	10	21	5	11			
1.5 Mile Run	16:09	13:05	20:49	16:13			
Males (50-59)					1.5 Mile Time	1.5 Mile Time	1.5 Mile Time
	15%	50%	15%	50%			
Sit-ups (1 min.)	17	26	7	17			
Push-ups (1 min.)	7	15	4 (modified)	13 (modified)			
1.5 Mile Run	18:22	14:33	22:53	18:05			
Males (60+)					OVERALL (P/F)	OVERALL (P/F)	OVERALL (P/F)
	15%	50%	15%	50%			
Sit-ups (1 min.)	13	20	2	8			
Push-ups (1 min.)	5	15	1 (modified)	8 (modified)			
1.5 Mile Run	21:34	16:19	25:02	20:08			
					15% (Y/N)		

Students must pass each event, at the minimum 50th percentile of the Cooper Institute standards, in order to be eligible for the state certification exam.

Fitness Specialist Signature Date

Commander Signature Date

Fitness Specialist Signature Date

Commander Signature Date

Fitness Specialist Signature Date

Commander Signature Date