

DEPARTMENT OF EMERGENCY SERVICES & PUBLIC PROTECTION
 CONNECTICUT POLICE ACADEMY
 POLICE OFFICER STANDARDS & TRAINING COUNCIL

COURSE REGISTRATION FORM

ONE FORM PER APPLICANT

AUTHORIZED OFFICIAL _____
 (PLEASE PRINT)

AGENCY _____

TELEPHONE _____ EMAIL _____

SIGNATURE _____

I HAVE ADVISED STAFF OF APPROPRIATE DRESS CODE FOR THIS COURSE.

Title of Course _____

Location of Course _____

Dates of Course _____

Applicant Name: _____ Rank: _____

POST I.D. #: _____ ADMIT _____ DENY _____

REGISTRANT EMAIL ADDRESS

Refer to course announcement for information

(REQUIRED)

Email this form to brian.p.reilly@ct.gov **or**
 Mail :
 T/O Brian Reilly
 Connecticut Police Academy
 Police Officer Standards & Training Council
 285 Preston Avenue
 Meriden, CT 06450-4891

Questions:
 Training Officer Brian Reilly
 203-427-2614 (desk)
 203-627-8584 (cell)
brian.p.reilly@ct.gov

BILLING INFORMATION TO BE COMPLETED BY APPLICANT

CHIEF OF POLICE OR COMMANDING OFFICER OF AGENCY: _____ AGENCY: _____ ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ TELEPHONE #: _____ P.O.# (if applicable): _____

**TUITION (PER APPLICANT)
 TO BE COMPLETED BY APPLICANT**

\$75 _____	1 day or less
\$200 _____	2-5 days
\$300 _____	6-10 days