



BASIC LAW ENFORCEMENT TRAINING INFORMATION SHEET
RETURN THIS SHEET TO BLET STAFF IMMEDIATELY

Date: _____

Name _____
First Middle Last

Maiden/Former Name _____

Mailing Address _____
P.O. Box or Address

City State ZIP Code County

Cell Phone () - Home Telephone () - Work Telephone () -

DOB / Place of Birth - - / Citizenship (Country) _____

E-Mail Address _____

Have you maintained your residence in North Carolina for at least 12 months prior to the date of this application?

Yes No

If no, when did you begin residence in North Carolina? Month _____ Day _____ Year _____

Which cities/states have you lived in since the age of 16? Dates of Residence

_____ to _____
City/State month/day/year month/day/year

_____ to _____
City/State month/day/year month/day/year

_____ to _____
City/State month/day/year month/day/year

_____ to _____
City/State month/day/year month/day/year

You are applying for:

Day School /8A-5P * Elizabeth City Campus



**REQUEST FOR SPONSORSHIP FOR BASIC LAW ENFORCEMENT TRAINING FOR
COLLEGE OF THE ALBEMARLE**

_____ agree to sponsor _____
(Sponsoring Agency Name, printed) (Sponsored Student Name, printed)

in the Basic Law Enforcement Training (BLET) program. This sponsorship does not constitute any agreement to hire the sponsored student upon completion of the BLET program or to provide financial assistance for enrollment. As the Sponsoring Agency Representative, I am attesting to the fact that a background check was conducted and revealed nothing that would prohibit this individual from being employed by a law enforcement agency. I further attest the named individual is at least 20 years of age.

Chief, Sheriff, or Director's Printed Name

Chief, Sheriff, or Director's Signature of Agency

Date

ACKNOWLEDGMENT

I, the undersigned sponsored student, understand that the Sponsoring Agency has undertaken no obligation to provide financial support or assistance for such training.

I, the undersigned sponsored student, further understand that the Sponsoring Agency has made no commitment to employment upon completion of the BLET program now or at any time in the future.

I, the undersigned sponsored student, accept responsibility for the nature and inherent risk incident to Basic Law Enforcement Training and do hereby release and discharge the Sponsoring Agency, its agents and employees, from any and all claims, damages, or causes of actions resulting from or arising out of participation in the BLET program. I further understand that sponsorship must be retained throughout the BLET program in order to remain enrolled.

Sponsored Student's Signature

(Date)

Sworn and subscribed to before me _____
Notary Public

this _____ day of _____, 20____. My commission expires: _____

GRADE RELEASE REQUEST

College of the Albemarle has my permission to release my grades and/or performance evaluations to my sponsoring agency upon their request, and any agency I request in writing.

Signature of Student

Date

LAW ENFORCEMENT PROGRAMS
(STUDENT INSURANCE RESPONSIBILITY)

College of the Albemarle **DOES NOT** carry any type of insurance on students in the law enforcement programs (i.e. DOCC, BLET, etc.). Sponsoring agencies of students not employed by that agency **DO NOT** carry insurance on the student that agency is sponsoring.

YOU ARE RESPONSIBLE FOR YOUR OWN INSURANCE.

Signature of Student

Date

BASIC LAW ENFORCEMENT TRAINING
APPLICANT CERTIFICATION OF UNDERSTANDING

College of the Albemarle has provided me with the Admissions Policies and Procedures including the Legal Requirements for Law Enforcement Employment and Performance and Behavior Standards. I certify that I have received read, and understand this information as it relates to the Basic Law Enforcement Training Program. I certify that all information I provided on this application and provided in order to meet other admissions requirements is correct. I also certify that I have met the admission requirements regarding minimum standards for employment and criminal activity.

Applicant Signature _____

Date _____