Montana Law Enforcement Academy Professional Programs Course Application

2260 Sierra Road East • Helena, MT 59602 • Phone (406) 444-9950



Course Requested		
Date of Training Location of Training		raining
Number of Training Hours	<u> </u>	
Agency Information		
Agency Name		
Mailing Address		
City	State	Zip
Training Coordinator/Supervisor Contact N	lame	
Phone	E-mail	
Applicant Information		
Name (First, MI, Last)		
Mailing Address		
City	State	Zip
Phon <u>e</u>	Work E-mail	
Male Female Date	of Birth / / MM DD YY	Date of Hire / / MM DD YY
On-site Professional Courses Only		
Available Accommodations: Lodging Request (\$15 night) Y N	Full Meal Plan (\$14 day	Y) Y
Special Dietary Needs Y N III If ye	es, explain:	
Be advised that your agency will be application unless MLEA is notified		
	and has met all the minimum	full-time or part-time employee and compensated qualifications for employment as dictated in 7-32-303 fontana for all other public safety officers.
Administrator Signature		Date
	and have met all the minimur	n a full-time or part-time employee and compensated n qualifications for employment as dictated in 7-32-303 fontana for all other public safety officers.
Applicant Signature_		Date

Application must be received by MLEA 15 days prior to the start of the course!