Print Form

FTC-OSL-10A (2/09)

Department of Homeland Security
Federal Law Enforcement Training Center

TRAINING REGISTRATION REQUEST - RURAL POLICING INSTITUTE

PROGRAM TITLE (required)

DATES OF TRAINING (required)	LOCATION OF TRAINING (required)

NAME (as you want it to appear on certificate)	SOCIAL SECURITY NUMBER (see privacy act statement)	RANK/TITLE	SEX ☐ Male ☐ Female

DEPARTMENT ADDRESS

Department/Agency Name: _____

Street: _____ P.O. Box: _____

City: _____ County: _____ State: _____ Zip Code: _____

OFFICE TELEPHONE NUMBER	FAX TELEPHONE NUMBER	E-MAIL
____ - ____ - _____	____ - ____ - _____	

AGENCY TYPE

☐ State ☐ Local ☐ Tribal ☐ Campus Police ☐ Other _____

Number of Sworn Law Enforcement Officers in your Department?

☐ 1-24 ☐ 25-49 ☐ 50-249 ☐ 250 +

AGENCY/SUPERVISOR APPROVAL (required)

I hereby authorize the individual stated above to attend the requested training.

_____	_____	_____
Signature of supervisor/approving official	(Typed name of supervisor/approving official)	(Title)

FAX THIS FORM TO:

Federal Law Enforcement Training Center
Phone: (912) 261-4048/4049/4050
Fax: (912) 261-4047
Email: FLETC-RuralPolicingInstitute@dhs.gov

IMPORTANT INFORMATION

Eligibility: To be eligible for training funded by the FLETC Rural Policing Institute (RPI), the student's employing agency must be geographically located **outside** of a Metropolitan Statistical Area as defined by the U.S. Office of Management and Budget. To determine eligibility, we suggest you visit the U.S. Census Bureau, State & Local QuickFacts website at http://quickfacts.census.gov/qfd/, and select the state and county in which your agency is located. Then, scroll down to the last row on the table to find out your agency's status of Metro, Micro, or None. Micro or None are eligible for RPI funding.

Confirmation: A confirmation letter with details of the training will be provided upon acceptance into the program. This form is used to REQUEST registration. **Before making travel arrangements, please ensure you are actually registered in the program.**

Private Organization: Applicants from private organizations must be sponsored by a state, local, or federal law enforcement agency.

Privacy Act Statement

Authority: *The authority to collect the information is derived from the Government Employees Training Act, 5 USC 4101-4118 as implemented by Executive Order 11348 of April 20, 1969 and Reorganizing Plan No. 26 of 1950 and the Treasury Department Order No. 140-01 (Federal Law Enforcement Training Center), and Memorandum of Understanding for the Sponsorship and Operation of the Consolidated Federal law Enforcement Training Center.*

Purpose and Uses: *The information you supply will be used to assist the government in retrieving information documenting your training. If you furnish none of the information requested, your attendance in training will be immediately terminated. These records and information in the records may be used to: (1) disclose pertinent information to appropriate Federal, state, local or foreign agencies responsible for investigating or prosecuting the violations of, or for enforcing or implementing, a statute, rule, regulation, order, or license, where the disclosing agency becomes aware of an indication of a violation or potential violation of civil or criminal law or regulation; (2) disclose information to a Federal, State, or local agency, maintaining civil, criminal or other relevant enforcement information or other pertinent information, which has requested information relevant to or necessary to the requesting agency's or the bureau's hiring or retention of an individual, or issuance of a security clearance, license, contract, grant, or other benefit; (3) disclose information to a court, magistrate, or administrative tribunal in the course of presenting evidence; (4) share information with collaborating organizations providing training facilities and/or instructors to ensure access and credit. Other routine uses can be found in FLETC Privacy Act System of Records Notice FLETC .002 – FLETC Trainee Records.*

Effects of Nondisclosure: *If you furnish only part of the information required, an attempt will be made to maintain and process your records. If the information withheld is found to be essential to effectively maintaining and processing your records, you will be so informed, and your training will terminate unless you supply the missing information.*

Disclosure of your Social Security Number (SSN): *Disclosure by you of your Social Security Number (SSN) is not mandatory. Solicitation of the SSN is authorized under the provisions of Executive Order 9397 dated November 23, 1943. The SSN will be used only as necessary in connection with retrieving your records. The use of the SSN is made necessary because of the large number of present and former students who attend or have attended Center Programs, and who potentially may have identical names and birth dates and whose identities can only be distinguished by the SSN.*