

ALASKA ASSOCIATION OF CHIEFS OF POLICE



Law Enforcement Agency Accreditation Application

ALASKA LAW ENFORCEMENT AGENCY ACCREDITATION APPLICATION

Agency Name: _____

ORI: _____

Street Address: _____

Mailing Address: _____

City: _____ Zip Code: _____

Dispatch Phone: (907) _____ - _____

Administrative Phone: (907) _____ - _____

URL: _____

Email: _____

Chief Executive Officer: _____

Title: _____

Program Manager: _____

Title: _____

ELIGIBILITY

All law enforcement agencies having a primary responsibility for the enforcement of Alaska Statutes and/or Borough or City Ordinances are eligible for accreditation. Questions of eligibility will be resolved by the AACOP Executive Committee.

AGENCY PROFILE QUESTIONNAIRE

The agency Profile Questionnaire is designed to provide information about your agency. The information will be utilized by the ALEAAC and your accreditation assessment team to better understand your agency needs. It may also be used to provide a general profile of agencies attempting to upgrade standards of law enforcement across Alaska.

FEES

The following fee schedule will apply to agencies seeking accreditation.

10 or fewer commissioned personnel	\$100
11 to 50 commissioned personnel	\$150
51 to 99 commissioned personnel	\$200
100 or more commissioned personnel	\$250

All of the fee will be paid at the time of application. Checks and/or money orders accompanying an application for accreditation must be made payable to:

Alaska Association of Chiefs of Police.

Expenses for the on-site assessment team will be paid by the applying agency on an actual cost basis.

AGREEMENT

With this application we agree to adopt and utilize policies in compliance with the Professional Standards adopted by the ALEAAC. We further agree that we will assist the assessors assigned to make the assessment of compliance of our agency. Professional law enforcement personnel will conduct the inspection and we agree to allow them access to our department records and personnel for purposes of assessment.

We understand the commitment our agency will be making in order to work with the ALEAAC and accept all of the above.

This report is subject to the provisions of the Freedom of Information Act and may be subject of review by third parties.

_____ By: _____
DATE AUTHORIZED SIGNATURE TITLE

PRINTED NAME

ALASKA LAW ENFORCEMENT AGENCY ACCREDITATION APPLICATION

Departmental accreditation committee contacts:

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

1. COMMUNITY DATA

What type of community does your agency primarily serve?

- | | |
|----------------------------------|-----------------------------------|
| <input type="checkbox"/> City | <input type="checkbox"/> Urban |
| <input type="checkbox"/> Borough | <input type="checkbox"/> Rural |
| <input type="checkbox"/> State | <input type="checkbox"/> Suburban |
| <input type="checkbox"/> Other | <input type="checkbox"/> Other |

How many square miles are within your primary jurisdiction? _____

What is the census population of your jurisdiction? _____

List any major population fluxuations (seasonal, day vs. night, etc.). _____

List any unusual geographic, economic, or social characteristics of your jurisdiction.

2. AGENCY DATA

List current budget total and budget for last 3 years.

20____ \$ _____
20____ \$ _____
20____ \$ _____
20____ \$ _____

List the hours of operation of your agency.

_____ 24 hours / 7 days
_____ Other (specify) _____

List any satellite stations, sub-stations, or outside facilities (storage, firing range, training facilities, etc.)

List outside agencies which provide services to your jurisdiction.

Does your agency participate in the Civil Service/Merit System?

_____ Yes _____ No _____

Name of Agency's Liability Insurance Carrier: _____

Check any specialized technical services your agency provides:

<input type="checkbox"/>	CANINE	<input type="checkbox"/>	ORDNANCE DISPOSAL
<input type="checkbox"/>	AVIATION	<input type="checkbox"/>	SCUBA
<input type="checkbox"/>	SWAT	<input type="checkbox"/>	DARE
<input type="checkbox"/>	SAR	<input type="checkbox"/>	OTHER (specify)_____

Check any special purpose vehicle your agency owns or utilizes:

<input type="checkbox"/>	MOTORCYCLES	<input type="checkbox"/>	ALL-TERRAIN (off-road)
<input type="checkbox"/>	AIRCRAFT	<input type="checkbox"/>	SNOW MACHINE
<input type="checkbox"/>	WATERCRAFT	<input type="checkbox"/>	OTHER (specify)

3. PERSONNEL

List all personnel employed by your agency:

	20__	20__	20__
FULL TIME SWORN PERSONNEL			
PART TIME SWORN PERSONNEL			
FULL TIME NON-SWORN PERSONNEL			
PART TIME NON-SWORN PERSONNEL			
RESERVE / AUXILIARY			
SEASONAL SWORN			
CIVILIAN			
OTHER			

4. TRAINING

Does your agency have a Field Training Program?

_____ No _____ Yes If yes, length of training: _____

Describe training of sworn personnel:

How often do officers receive in-service firearms training?

List your agency's in-service training budget for the current year and for the last 3 years.

20__ \$ _____

20__ \$ _____

20__ \$ _____

20__ \$ _____

List number of hours of training per officer per year:

20 _____ hours
 20 _____ hours
 20 _____ hours
 20 _____ hours

5. CRIME AND SERVICE DATA

List the number of calls for service received in the last 4 years:

20 _____ calls for service
 20 _____ calls for service
 20 _____ calls for service
 20 _____ calls for service

List the following crime reporting information for your agency

OFFENSES	20 _____	20 _____	20 _____
PART 1 OFFENSES			
PART 1 ARRESTS			
PART 1 CLEARED			
PART 2 OFFENSES			
PART 2 ARRESTS			
PART 2 CLEARED			

6. LIABILITY

List any lawsuits your agency has been involved with (optional):

Year	Topic / Charge	Status	Impact

7. OPERATIONS

Date of last major revision/update of policies and procedures? _____

Does your department have the following written policies?

POLICY	YES	NO
FISCAL MANAGEMENT		
INVENTORY AND ACCOUNTABILITY OF EVIDENCE AND PROPERTY		
PERSONNEL RECRUITMENT AND SELECTION		
PSYCHOLOGICAL SCREENING OF APPLICANTS		
PERFORMANCE EVALUATIONS		
DISCIPLINE		
PROMOTION		
GRIEVANCE		
DEADLY FORCE		
NON-DEADLY FORCE		
INTERNAL AFFAIRS		
COMMUNITY RELATIONS		
PUBLIC INFORMATION / MEDIA RELATIONS		
CRIME PREVENTION		
BASIC TRAINING		
IN-SERVICE TRAINING FOR SUPERVISORS / LINE OFFICERS		
PURSUIT		
ROADBLOCKS		
TRAFFIC ACTIVITY (ENFORCEMENT, TOWING, VEHICLE IMPOUNDMENT)		
CRIMINAL INVESTIGATION AND CASE MANAGEMENT		
USE OF INFORMANTS		
CRIME SCENE OPERATIONS / MANAGEMENT		
DISASTER AND UNUSUAL OCCURRENCES		
MUTUAL AID		
PRISONER TRANSPORT AND CUSTODY		
BLOODBORNE PATHOGENS AND UNIVERSAL PRECAUTIONS		
JUVENILE OPERATIONS		
DOMESTIC VIOLENCE		
HANDLING MENTAL SUBJECTS		

List the most serious problems now facing your organization:
