

Waiver Request Granted To:

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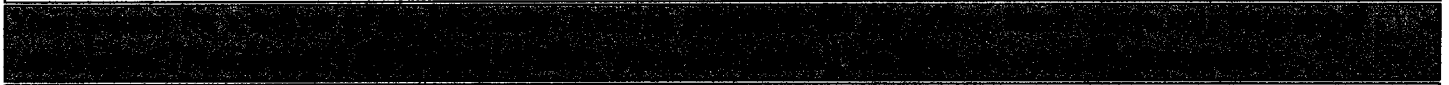
Name

Social Security Number

Agency Name



| Full-time | Part-time |
|--|--|
| <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Correctional <input type="checkbox"/> Court Security <input type="checkbox"/> Successful completion of Basic Recruit training and the State Certification Exam during the period of _____ through _____ while a member of the _____. <input type="checkbox"/> Successful completion of the Board's Intern Basic Training Course. <input type="checkbox"/> Previous training and experience. | <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Correctional <input type="checkbox"/> Court Security <input type="checkbox"/> Successful completion of Basic Recruit training and the State Certification Exam during the period of _____ through _____ while a member of the _____. <input type="checkbox"/> Successful completion of the Board's Intern Basic Training Course. <input type="checkbox"/> Previous training and experience. |



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|---|---|
| <input type="checkbox"/> Successful completion of the 24/40-Hour Illinois Mandatory Firearms Training course per statutory requirement. <input type="checkbox"/> Successful completion of the Illinois Law Enforcement Officers Equivalency Examination. <input type="checkbox"/> Successful completion of the Board's Illinois Law for Police course within 90 days. <input type="checkbox"/> Successful completion of the Board's Transition course. | <input type="checkbox"/> Successful completion of the 24/40-Hour Illinois Mandatory Firearms Training course per statutory requirement. <input type="checkbox"/> Successful completion of the Illinois Part-time Assessment Examination. <input type="checkbox"/> Successful completion of the Board's Illinois Law for Police course within 90 days. <input type="checkbox"/> Successful completion of the Board's Transition course. |
| <input type="checkbox"/> Condition of the Corrections Training Waiver is dependent upon written verification from the Sheriff that this officer received a thorough indoctrination of the Illinois County Jail Standards and Correctional Law. | |

Executive Director

Date

Waiver Request Denied :

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|-------|-------------------------|
| Name: | Social Security Number: |
|-------|-------------------------|

Your request for a waiver of the Minimum Training Standards for the officer listed above has been denied. The officer must complete the Recruit Basic Training course within statutory time limits at one of the Board's certified training academies or mobile team units as applicable.

Executive Director

Date

06/15/98

