

Texas Police Chiefs Association ACCREDITED AGENCY PROGRAM APPLICATION

____ Re-Accreditation

____ Initial Accreditation



TMLIRP Application? Y N

Name of Agency:	Agency Head:_			
Address:	City:		Zip:	
Email:	nail: Direct Phone:			
Is agency head's REQUIRED	TPCA Membership current? Y	esNo <i>If "No,</i>	" please <u>visit TPCA website to join.</u>	
Program Manager:	Em	ail:		
Direct Phone:	TPCA Region:	find your region	at <u>www.tml.org/234/Map-Officers</u>	
# Sworn Officers:	# Non-Sworn Officers:	# Total Pers	onnel:	
CALEA Accredited? Yes	_ No Use TML Risk	k Pool for Liability o	r WC? Yes No	
	ed the required Training in pers			
	nager attended the required Tra			
After reviewing the Best Busi	ness Practices, how many mor (24 months maximum allow	nths do you anticipa		
_	provide a log-in ID and passwo		s through the TPCAF electronic file to this requirement must be pre-	
_	• •		ndards using the accreditation ease contact the program director for	
begin (Initials) Ple	required ONLY on initial applicates as a indicate payment type: Me includes a one year member by credit card can be requested.	lailed check rship for the agend	cy's program manager.	
Agency Head's Signature		Date		
ALL fields above MUST b	e completed.		T0010(; 11 0 1	
Please e-mail completed application to: rpdirector@texaspolicechiefs.org		TPCA Office Use Only Membership Verified:		
Mailed applications and checks can be sent to:		Application Fee		
TPCA Foundation			Date Received:	
PO Box 1030				
Elgin, TX 78621	or (077) 776 E422		CC Check #	
Main Office: (512) 281-5400 (л (0//) //0 - 0423		TMLIRP Application? V N	