

APPLICATION FOR LAW ENFORCEMENT AGENCY CERTIFICATION

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Colorado Department of Law-POST 1300 Broadway 9th Floor Denver, CO 80203 post@coag.gov 720-508-6721 FAX 866-858-7486

November 2020

Agend	y Name: Agency ORI: CO						
Agend	y EIN: Agency DUNS:						
Chief	Executive Name: Title of Chief Executive:						
Chief	Executive E-mail:Phone Number:						
1. 🗆	I have reviewed the June 16, 2020, Presidential Executive Order on Safe Policing for Safe Communities, Executive Order No. 13929.						
2. 🗆	I understand that, based on the above Executive Order, U.S. Department of Justice discretionary grant funding is only available to local, state, university or college law enforcement agencies that are seeking, or have obtained, credentials certifying they meet certain standards on use of force.						
3. 🗆	I further understand that the above Executive Order on Safe Policing empowers the U.S. Attorney General to designate independent credentialing bodies, such as Colorado POST, to certify that a law enforcement agency meets conditions of eligibility for federal grants.						
4. \square I have determined that our agency meets the following mandatory conditions for certification:							
	□ Our agency's use-of-force policies adhere to all federal, state, and local laws						
	□ Our agency maintains use-of-force policies that prohibit the use of choke holds, except in those situations where the use of deadly force is allowed by law.						
5. □	Our agency is accredited by:						
	☐ The Commission on Accreditation for Law Enforcement Agencies (CALEA)						
	☐ The International Association of Campus Law Enforcement Administrators (IACLEA)						
	☐ The Colorado Association of Chiefs of Police (CACP)						
	☐ The International Association of Directors of Law Enforcement Standards and Training (IADLEST)						
6. 🗆	I also understand that as an Independent Credentialing Body, as designated by the U.S. Attorney General for certifying agencies pursuant to the Executive Order on Safe Policing, Colorado POST will conduct follow up audits to ensure our agency meets conditions for federal grants.						
7. 🗆	I acknowledge this certification is only in effect for three (3) years and must be renewed.						
Privacy Act Section (e)(3) Statement							

Section (e)(3) of the Privacy Act of 1974, codified at 5 U.S.C. 552a, requires that the COPS Office inform users of its authority to request personal information, how the information will be used, and the effects of not providing the requested information.

Authority: The Violent Crime Control and Law Enforcement Act of 1994, the Violence Against Women and

Department of Justice Reauthorization Act of 2005, and E.O. 13929 Safe Policing for Safe Communities.

Purpose: To collect names of law enforcement executives for agencies that have been certified by an independent credentialing body as complying with two mandatory safe policing principles in the U.S. Department of Justice Standards of Certification. The information will also be used to track the number of law enforcement agencies that have been certified in the United States by January 31, 2021.

Routine Use: This information will be shared with other Department of Justice components to determine an agency's eligibility for FY 2021 discretionary grant funding. This information may also be shared in accordance with the routine uses described in the COPS Office System of Records Notice (SORN) entitled COPS Management System: NexGen (CMS:NxG), Justice/COPS-003, 85 FR 3421. This SORN is located at https://www.justice.gov/opcl/doj-systems-records#DOJ.

Disclosures: Disclosure of names of law enforcement executives to the Department of Justice is voluntary. If the information is not provided, law enforcement agencies applying for Department of Justice discretionary grant funding will be able to check they are certified in the Justice Grants System (JustGrants) and upload a copy of their certification.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I I BEST OF MY KNOWLEDGE AND BELIEF, THEY ARE TSTATEMENT, MISSTATEMENT, OR INACCURACY MAY PROSECUTION.	TRUE, CORRECT, AND C	OMPLETE. I FURTH	ER ACKNO	WLEDGE TH	AT ANY FALSE
		Date:	-	<u>-</u>	
Applicant's Signature					
Subscribed and sworn to before me this	day of				
My Commission Expires:			TARY PU	BLIC	
DAN:					