

**Arizona Law Enforcement Accreditation Program**

**ANNUAL STATUS REPORT**

An annual report shall be submitted to the Commission by January 31st each year. The annual report shall cover the preceding calendar year. The Agency is responsible for notifying Commission staff of any major incident, event or circumstance, which may affect its standards compliance.

Please send your completed report electronically to kevin.rhea@azchiefsofpolice.org

**Annual Report Calendar Year** Click here to enter text.

**Agency Name** Click here to enter text.

**Agency Address** Click here to enter text.

**Number of Authorized Full-time Sworn Positions** Click here to enter text.

**Phone Number** Click here to enter text.

**Chief Executive Officer** Click here to enter text. **Email** Click here to enter text.

**Accreditation Manager** Click here to enter text. **Email** Click here to enter text.

**Has there been a change in the AM since the last Annual Report?** Choose an item.

**Date of Most Recent Accreditation** Click here to enter a date.

**Version of the manual you are using?** Click here to enter text.

**A. Upon reaccreditation, law enforcement agencies are expected to remain in compliance with all applicable standards.** Please supply the following information.

1. If the agency is not in compliance with all applicable standards, please list the standard(s) and reason for non-compliance.

Click here to enter text.

**B.** **Agency Status Changes -** Has the agency experienced any of the following status changes since the last accreditation or annual report? Please explain if the changes impacted standard compliance. Click here to enter text.

**Jurisdiction** (For example, your agency has or is in the process of contracting with another local municipality to provide services or your agency may be involved in a major reorganization or annexation project which may alter your service area)

**Functions or responsibilities** (For example, your agency is merging with another agency, or your agency is absorbing non law-enforcement duties)

**Local ordinances have been enacted that conflict with applicable standards or impact the agency**

**New labor contract or collective bargaining agreement**

**C. Significant Events**

1. Have there been any negative media reports that a reasonable person could perceive as affecting the agency’s compliance with mandatory accreditation standards? Choose an item.

**If yes, please explain.**

Click here to enter text.

1. Have any events occurred that a reasonable person could perceive as negatively affecting the agency’s compliance with mandatory accreditation standards? Choose an item.

**If yes, please explain.**

Click here to enter text.

1. Is your agency under a consent decree, or under investigation by the Department of Justice or the Department of Labor? Choose an item.

**If yes, please explain.**

Click here to enter text.

1. Has your agency had any significant personnel changes or personnel matters which could impact your agency’s ability to maintain accreditation? Choose an item.

**If yes, please explain.**

Click here to enter text.

**D. Chief Executive Officer’s Certification**

I hereby certify that I have reviewed all information contained within this report and to my knowledge all applicable accreditation standards are currently being complied with and practiced by the members of this agency, unless indicated above.

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**Chief Executive Officer (Signature)** **Date**

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**Chief Executive Officer (Print Name)**

**PREPARED BY:**

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**Signature**  **Date**

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**Print Name Telephone Number**