



# Continuing Professional Training (CPT) Prior Approval of Training

## Prior Approval of Training

Prior approval of training is not required, but the Ohio Peace Officer Training Commission's Executive Director will, upon request, review a proposed training course and where appropriate, provide a written approval for the course.

This form should be completed in its entirety, signed by the requesting official, and submitted to the Executive Director at the London address provided below or by email to [cptpreapprovals@ohioattorneygeneral.gov](mailto:cptpreapprovals@ohioattorneygeneral.gov). All approvals and/or denials will be forwarded in writing to the Requestor.

All requests must include a copy of the **lesson plan**.

## Attestation of the Requestor

By my signature below, I attest to the following:

1. The information provided on this form, is to the best of my knowledge, true and accurate. I understand that falsification of any of the information on this request may result in my ineligibility to receive approval of subsequent requests, may have an impact on my agency's eligibility for reimbursement of training, and may carry legal consequences.
2. The purpose of training herein described is to address matters directly related to the duties and responsibilities of a law enforcement officer. This training serves a recognized law enforcement purpose and has significant intellectual and/or practical content, the primary objective of which is to improve the officer's professional competence.
3. The training described herein will be conducted in accordance to the Ohio Administrative Code 109:2-18.

Requestor Signature: \_\_\_\_\_

Date: [Click here to enter a date.](#)

**Ohio Peace Officer Training Commission  
Education and Policy Section**

• P.O. Box 309 • London, Ohio 43140 • PHONE: 800-346-7682 • FAX: 866-393-1275 •  
[cptpreapproval@ohioattorneygeneral.gov](mailto:cptpreapproval@ohioattorneygeneral.gov)

## Requestor Information

Requestor Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_

## Course Information

Course Title: \_\_\_\_\_

Course Topic: \_\_\_\_\_

Course Dates (s): \_\_\_\_\_ COURSE LENGTH (HOURS): \_\_\_\_\_

If this course is to be evaluated for compliance with source-specific funding, please list:

\_\_\_\_\_

## Lesson Plan

Attach a copy of your lesson plan. It must include the following information:

- Typewritten
- List of necessary Training Aids
- Goals and Objectives
- Bibliography of references
- Description of the material to be covered
- Training serves a recognized law enforcement purpose and has significant intellectual or practical content

## Training Area

All training shall be conducted in a setting that is safe, physically suited to the educational activity, and conducive to effective learning. Classroom space shall have:

- Adequate heating, lighting, and ventilation
- Restrooms
- Tables and chairs suitable for writing
- Whiteboard or equivalent
- Lectern, stand, or table for Instructor's use
- Audiovisual equipment

Physical skills training shall be conducted in a gymnasium or large indoor area with appropriate training and safety equipment.

**Ohio Peace Officer Training Commission**  
**Education and Policy Section**

• P.O. Box 309 • London, Ohio 43140 • PHONE: 800-346-7682 • FAX: 866-393-1275 •  
[cptpreapproval@ohioattorneygeneral.gov](mailto:cptpreapproval@ohioattorneygeneral.gov)

**Instructor Information**

Please submit a separate page for each instructor. Copies of the instructor’s biography, curriculum vitae, or resume, and all applicable credentials must be attached.

Instructor Name: \_\_\_\_\_ Title: \_\_\_\_\_

Instructor Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_

This instructor qualifies to teach Continuing Professional Training in one or more of the following three ways (*please check all that apply and attach supporting documentation*).

- The instructor has at least five years of full-time law enforcement experience and meets at least one of the following criteria:
  - The instructor is an OPOTC-certified Peace Officer Basic Training Instructor (Certificate number : \_\_\_\_\_); *or*
  - The instructor has, at a minimum, a four-year college degree; *or*
  - The instructor has completed an instructional skills course approved by the Executive Director; *or*
  - The instructor is a licensed or certified trainer
- The instructor is a certified or licensed professional and is providing instruction in a subject area directly related to the field in which they are certified or licensed.
- The instructor is otherwise qualified as follows:

---

---

---

---

---

**For OPOTC Use Only**

Date Received: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Reviewed By: \_\_\_\_\_

Approved for: \_\_\_\_\_

- Lesson plan meets criteria
- Instructor(s) meets criteria
- Classroom space meets criteria

Denied

Reason: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Returned

- Incomplete application
- Insufficient Course Information
- Insufficient lesson plan
- Insufficient Instructor Qualifications
- Insufficient Funding-source information
- Other (Please explain): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Letter sent

**Ohio Peace Officer Training Commission  
Education and Policy Section**

Date: \_\_\_\_\_ Sent by: \_\_\_\_\_

**Ohio Peace Officer Training Commission  
Education and Policy Section**

• P.O. Box 309 • London, Ohio 43140 • PHONE: 800-346-7682 • FAX: 866-393-1275 •  
[cptpreapproval@ohioattorneygeneral.gov](mailto:cptpreapproval@ohioattorneygeneral.gov)