



# 2026 Expedited CPT Application

## Renewal of agency course approved for CPT in 2025

### Instructions

This form should be submitted only by an appointing authority that was approved for a Continuing Professional Training (CPT) course in 2025 and would like to receive credit for **the exact same course** in 2026. Send your completed application to: [CPTPreApprovals@OhioAGO.gov](mailto:CPTPreApprovals@OhioAGO.gov). *If you used this form in 2025 you must re-apply filling out the entire 2026 application.*

*If your course or materials have been updated in any way, do not submit this application. Instead, please submit a 2026 Preapproval Application.*

### Agency Record Retention and Reporting

Appointing authorities are required to maintain officer training records sufficient to demonstrate compliance with the requirements of OAC 109:2-18-05.

Remember to include the course approval number provided by OPOTC [#25CPT-xxx] on all sign-in sheets and on any certificates of completion given by the agency.

#### Request for Course Approval:

2025 CPT Number: \_\_\_\_\_

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

Course Dates: \_\_\_\_\_ Category: \_\_\_\_\_

TOTAL HOURS: \_\_\_\_\_

### Instructor Information

Instructor 1 – Name: \_\_\_\_\_ Title: \_\_\_\_\_

Instructor 2 – Name: \_\_\_\_\_ Title: \_\_\_\_\_

Instructor 3 – Name: \_\_\_\_\_ Title: \_\_\_\_\_

### Attestation of Appointing Authority and Agency Legal Counsel

With my signature below, I attest that there are no deviations from the course approved in 2025 and the instructors remain qualified under OAC 109:2-18-03.

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

Name of Agency's Sheriff/Chief/CEO: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Agency's Legal Counsel: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OPOTC USE

RCVD: \_\_\_\_\_

RCVD By: \_\_\_\_\_

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

Denied: \_\_\_\_\_