SLEO Agency Certification Form

| Trainee Name | | | |
|---|--|---|---|
| Last | First | Middle Initial | Suffix |
| | | | |
| I certify that this trainee has be | en lawfully appointed as a: | | |
| ☐ Special Law Enforcement | ent Officer Class I (SLEO-I) | | |
| ☐ Special Law Enforcement | ent Officer Class II (SLEO-II) |) | |
| pursuant to the provisions of <u>N</u> appointing authority, providing this trainee will be supervised to Commission Rule <u>N.J.A.C.</u> 13: clearance, urinalysis, finger pri | for the appointment of speci by me or my designee, and the 1-8.1, including a background | al law enforcement officer at I have complied with the | rs. I further certify that e Police Training |
| | Special Law Enforcement Off sychological clearance requir | | exempt |
| Date: | Chief/Agency CEO: _ | Printed Name | |
| | Chief/Agency CEO: _ | Signature | |

