



Davidson Campus: P.O. Box 1287, Lexington, NC 27293-1287 Telephone: 336-249-8186 FAX: 336-249-9053

Davie Campus: 1205 Salisbury Road, Mocksville, NC 27028 Telephone: 336-751-2885 FAX: 336-751-6192

REQUEST FOR SPONSORSHIP FOR BASIC LAW ENFORCEMENT TRAINING

_____ agrees to sponsor _____
(Sponsoring Agency Name) *(Sponsored Student)*

in the Basic Law Enforcement Training (BLET) program. By requesting the admission of this individual, the sponsoring agency attest to the fact that a background check was conducted by the agency or presented to the agency and revealed no violations that would prohibit this individual from being employed as a law enforcement officer. Furthermore, the agency is not aware of anything in this individual's character or reputation that would bring discredit on the agency, law enforcement, or Davidson County Community College. This sponsorship does not constitute any agreement to hire the sponsored student upon completion of the BLET program or to provide financial assistance for enrollment.

ACKNOWLEDGEMENT

I, the undersigned sponsored student, understand that the Sponsoring Agency has undertaken no obligation to provide financial support or assistance for such training.

I, the undersigned sponsored student, further understand that the Sponsoring Agency has made no commitment to employment upon completion of the BLET program or at any time in the future.

I, the undersigned sponsored student, accept responsibility for the nature and inherent risk incident to basic law enforcement training and do hereby release and discharge the Sponsoring Agency, its agents, and employees, from any and all claims, damages, or causes of actions resulting from or arising out of participation in the BLET program.

I further understand that sponsorship must be retained throughout the BLET program in order to remain enrolled. The agency may revoke sponsorship at anytime. Students must enroll in BLET within 1 year of sponsorship date.

(Printed Name of Sponsoring Agency Representative)

(Printed Name of Sponsored Student)

(Signature of Sponsoring Agency Representative)

(Signature of Sponsored Student)

(Date)

(Date)

Sworn and subscribed to before me _____,
(Notary Public)

this _____ day of _____, 20____.* My commission expires: _____.