



SCHEDULING REQUEST FOR POST EXAM

Academy Use Only

The Academy must be approved before an exam date will be scheduled.

This form must accompany the academy application.

Revised 11/24/17

<input type="checkbox"/> Adams County SO	<input type="checkbox"/> Jeffco SO/Lakewood PD
<input type="checkbox"/> AIMS CC	<input type="checkbox"/> Otero Jr. College
<input type="checkbox"/> Arapahoe CC	<input type="checkbox"/> Pikes Peak CC
<input type="checkbox"/> Aurora PD	<input type="checkbox"/> Pueblo CC
<input type="checkbox"/> CMC - Glenwood Spgs	<input type="checkbox"/> Pueblo PD
<input type="checkbox"/> Colorado Spgs PD	<input type="checkbox"/> Red Rocks CC
<input type="checkbox"/> CSP	<input type="checkbox"/> SW Colorado CC – Mancos
<input type="checkbox"/> CC of Aurora	<input type="checkbox"/> Technical College of the Rockies-Delta
<input type="checkbox"/> Denver PD	<input type="checkbox"/> Trinidad State Jr. College - Alamosa
<input type="checkbox"/> El Paso County SO	<input type="checkbox"/> Weld County SO
<input type="checkbox"/> Front Range CC	<input type="checkbox"/> WCPOA – Grand Jct.
<input type="checkbox"/> HRLETA – Highlands Ranch Basic Refresher	

Academy Staff contact for exam date confirmation:

NAME: _____

Email: _____

Requested Exam Date: _____ **Time:** _____

Alternate Exam Date: _____ **Time:** _____

POST USE ONLY

Academy dates _____

Academy approved on: _____

Scheduled exam date: _____

Expected number of trainees: _____

Roster due date: _____ Received: _____