



State of Arizona
Department of Education

**School Safety Program
FY 2014 Renewal Application Instructions**

Eligibility

Arizona public schools already funded through the School Safety Program

Release Date

March 18, 2013

Due Date

April 15, 2013

Midnight

How to Reapply

This renewal application must be submitted through the Arizona Department of Education's Grants Management Enterprise (GME) at www.ade.az.gov/gme.

Contact Information

For programmatic questions and assistance, contact the School Safety and Prevention Unit, 602-542-8730. For technical assistance with the online system, contact GME, 602-542-3695 or email grants@azed.gov.

**School Safety Program
Renewal Application Instructions
Fiscal Year 2014**

Grant Overview

The intent of the School Safety Program is to place School Resource Officers (SRO) and Juvenile Probation Officers (JPO) on school grounds to contribute to safe school environments that are conducive to teaching and learning. The grant provides seed money for the salary and benefits of these officers as established in ARS 15-155 for the purpose of violence and juvenile delinquency prevention. School Safety Program officers maintain a visible presence on campus; deter delinquent and violent behaviors; serve as an available resource to the school community; and provide students and staff with Law-Related Education (LRE) instruction and training. Officers are required to teach a minimum of 180 hours of LRE instruction per year. The officer is expected to intervene as a law enforcement officer or juvenile probation officer when necessary.

Requirements for the program are contained in the School Safety Program Guidance Manual, which can be downloaded at <http://www.azed.gov/prevention-programs/school-safety-program/>.

Project Period

This is a continuation application for year three of a three year grant. Requests for salary and benefits (under purchased professional services) for a continuing officer must be consistent with the Fiscal Year (FY) 2013 approved salary and benefits amount for that officer. Upward adjustments in salary and benefits cannot be accepted. If the actual salary of an officer is less than what was approved in FY 2013, the lesser amount of the two must be requested.

Year-End Reporting Requirement

All sites are required to submit a Year-End Report that collects 2013-2014 data. The report will be available in early June. Additional information will be forthcoming.

Renewal Application Overview

A complete renewal application consists of three parts: the Online Application, the *Cooperative Agreement Signature Page* form and the *School Safety Program Training Checklist* (one per partner).

The On-line Application must be **submitted by midnight April 15, 2013**. The *Cooperative Agreement Signature Page* and the *School Safety Program Training Checklist* must be **postmarked by April 15, 2013**. Incomplete and late applications may jeopardize program participation (an application without the *Cooperative Agreement Signature Page* or the *School Safety Program Training Checklist* is considered incomplete). Please note that grant assistance is only available until 5:00pm.

The application consists of the following:

Online Application submitted via the Grants Management Enterprise (GME) (required)

1. Budget Forms (Budget Line Items, Budget Description, Capital Outlay, and Payment Schedule)

2. Additional Assurances (read only)
3. District Administrator Information
4. Site Level Information (one page per site)
5. Officer Information (one page per officer)

Application Download submitted via postal services (required)

6. Cooperative Agreement Signature Page (one per site)
7. School Safety Program Training Checklist (one per partner)

Mail the *Cooperative Agreement Signature Page(s)* and *School Safety Program Training Checklist(s)* to the following address:

Arizona Department of Education, School Safety and Prevention, 1535 W. Jefferson Bin #29,
Phoenix, AZ 85008, ATTN: School Safety Program.

Cooperative Agreement Signature Page

Obtain the appropriate signatures from each entity involved in the School Safety Program for each site. The signature form acknowledges cooperation between the responsible parties, including the county juvenile probation department or local police department, school principal and district superintendent. Specifically, this form indicates that a law enforcement or juvenile probation department has agreed to provide an officer if a grant is awarded. **Do not submit a renewal application if you cannot get the assurance that an officer will be available to fill the position.** Each site must have its own *Cooperative Agreement Signature Page* (joint applicants submit one form). After award of the grant, the district/charter must develop a Service Agreement with their law enforcement or juvenile probation agency. Minimum requirements of the Service Agreement can be found on page 22 of the School Safety Program Guidance Manual.

The *Cooperative Agreement Signature Page* must be downloaded, completed in blue ink **for each site** (joint applicants submit one form) and mailed to the address stated above.

School Safety Program Training Checklist

The SSP training requirements must be met in order to be compliant with the grant. A *School Safety Program Training Checklist* is provided to assist with determination of the specific training requirements for each partner in each year of the grant, as well as for tracking and documenting compliance with this aspect of the grant.

The *School Safety Program Training Checklist* must be downloaded and completed **for each partner**: District Administrator, Site Administrator (for each site including all joint applicant partnering sites), Officer, and Agency (Officer) Supervisor. Keep the completed checklist on file for your records and mail a copy of each to the address stated above.

Online Tips

- Before utilizing the online system, review all documents in the Application Downloads section of GME by going to <http://www.azed.gov/grants-management/>. From there, click on the Applications tab and select Application Downloads.
- To begin the GME online application process, go to www.ade.az.gov/gme .

- When entering data online, it is recommended that you save frequently as a precaution. Each page will time out after one hour.
- If you need assistance utilizing the online system, contact the Grants Management office at (602) 542-3695 or email grants@azed.gov.
- If you need programmatic assistance, call (602) 542-8730.

Amendments

After application approval, revisions to the project must be made through an online amendment. All program changes require an amendment (e.g. budget line item changes, downward adjustment in salary/benefits, change in administrator, and change in officer).

- If there is a change in officer, please **do not** type over previously submitted information. Instead, go to the Officer Information Page for the officer being replaced and enter the updated information in the **Change in Officer** Information section (located at the end of the Officer Information page).
- A detailed explanation for each amendment must be provided in GME.

General Statement of Assurances (GSA)

The GME requires acceptance of the GSA, which includes the following statement: *Misrepresentation of information on grant applications can result in termination of program participation.* To review the General Statement of Assurance link on the Grants home page, please visit <http://www.azed.gov/grants-management/gsa/>.

Online Application Forms and Pages

Budget Forms and Allowable Expenditures

The *Budget Line Item* form must indicate the **total** amount the district is requesting for continuing sites.

The *Budget Description* form must contain a detailed description of each line item amount requested and must include a breakdown of salary and benefits for each officer. The description must also specify a 10-, 11-, or 12-month position for each officer.

The *Payment Schedule* must be completed indicating equal quarterly payments in September, November, February, and May.

Items Approved for Inclusion in Budget:

- Officer salary and benefits, up to the amount approved in FY13. Indicate a 10-, 11-, or 12-month position, consistent with page 18 of the guidance manual.
- Supplies at \$100 per site.
- Travel allowance for required trainings.

FY 14 Trainings	Outside of Maricopa County	Within Maricopa County	Training Requirement	Frequency
Officer new to the program	\$800	\$150	New Officer training	Once per new officer
Continuing officer	\$400	\$50	Advanced Law Related Education (LRE) Academy	Once per school year
School level administrator	\$400	\$0	Leadership training (various levels)	Once per school year
District level administrator	\$400	\$0	Leadership training (various levels)	Once per district administrator, per cycle
Agency Supervisor	\$400	\$0	Leadership training (various levels)	Once per school year

No other budget items will be considered.

District Administrator Contact Information Form

This form is for district/charter holder level information. Information will be used for correspondence.

District Administrator Information		
1	District Administrator Name	<input type="text"/>
2	Title	<input type="text"/>
3	Mailing Address	<input type="text"/>
4	City	<input type="text"/>
5	State (AZ)	<input type="text"/>
6	Zip Code	<input type="text"/>
7	Phone Number Enter as: (XXX) XXX-XXXX + extension	<input type="text"/>
8	Fax Number Enter as: (XXX) XXX-XXXX	<input type="text"/>
9	Email Address	<input type="text"/>

10	<p>Select the required SSP training the District Administrator attended during the 2011–2012 or 2012–2013 school year.</p> <p>If the District Administrator did not attend the required training, select Did Not Attend.</p>	
11	<p>If the District Administrator did not attend an SSP training during the 2011–2012 or the 2012–2013 school years, please provide an explanation.</p>	

Site Level Information Page (one page per school)

A separate page is required for each school site for which renewal is requested (unless submitting jointly with partnering sites). This multiple standard page allows an LEA to submit one page per school. Once a page has been completed and saved, a blank template will appear should you need to continue with another site selection. Your saved page will appear in the left blue frame with the site number as the page title. Once all continuing sites have been entered, proceed to the Officer Information Page.

Each school has a designated site number (refer to approved FY13 application) starting with number one and going up sequentially by the number of schools awarded within the district/charter. Schools submitting a joint renewal application will share the designated site number of the primary school. Site detail information for the partnering schools must be entered in Joint Applicant-Partnering Schools section of this page. (A separate Joint Applicant-Partnering Schools section must be completed for each partnering site.)

A drop down box with site names is provided (for joint applicants, the primary site is listed first followed by additional sites). For special circumstances, such as, a school has been renamed or the drop down is missing the name of an eligible school, a text input box has been provided for you to enter the site name.

Site Administrator Information: The purpose of this section is to indicate the school number, provide school level information such as Average Daily Membership (ADM), and to report who is responsible for program implementation and correspondence. The program contact must be the school principal or assistant principal who will work most directly with the officer.

1	Site Number	
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	<p>Indicate the number this site corresponded to in your FY13 application.</p> <p>Joint applicants share the designated site number of the primary school.</p>	
2	<p>Enter this site's 9 digit CTDS number without hyphens.</p> <p>Example: 012345678.</p>	<input type="text"/>
3	<p>Site Name</p> <p>Select site name from the drop down box (for joint applicants, the primary site will be listed first) and skip to Question 5.</p> <p>If a site name is not listed in this drop down box, please leave it blank, proceed to Question 4, and enter the site name.</p> <p>Only one site name can be selected for each page.</p>	<input type="text"/>
4	<p>If site name was not listed in the drop down box above, please enter the site name.</p>	<input type="text"/>
5	<p>What is the Average Daily Membership (ADM) of this primary site?</p>	<input type="text"/>
6	<p>School Level</p> <p>Select all that apply.</p>	<input type="checkbox"/> High School <input type="checkbox"/> Middle School <input type="checkbox"/> Elementary School <input type="checkbox"/> Other <input type="text"/>

7	Site Administrator Name This person cannot be the officer.	<input type="text"/>
8	Title	<input checked="" type="radio"/> Principal <input checked="" type="radio"/> Assistant Principal <input checked="" type="radio"/> Other <input type="text"/>
9	Mailing Address	<input type="text"/>
10	City	<input type="text"/>
11	State (AZ)	<input type="text"/>
12	Zip Code	<input type="text"/>
13	Telephone Number Enter as: (XXX) XXX-XXXX + extension	<input type="text"/>
14	Fax Number Enter as: (XXX) XXX-XXXX	<input type="text"/>
15	Email Address	<input type="text"/>
16	Enter the name of the officer serving this site. If the position is currently vacant, type VACANT. Enter as: John Doe – JPO VACANT	<input type="text"/>
17	Provide the name of the school Principal if the person identified as the 'Site Administrator' in question #7 is not the Principal.	<input type="text"/>

Site Administrator Training Attendance: The purpose of this section is to demonstrate the training requirement for the 2012–2013 school year was met by the site administrator. Use the training checklist provided to assist in completing this section.

18	<p>Select the required SSP training the site administrator attended during the 2012 – 2013 school year.</p> <p>If the site administrator did not attend the required training, select Did Not Attend.</p>	<input type="text"/>
19	<p>Provide the name of the site administrator who attended this training.</p> <p>If the site administrator did not attend the required training, enter Did Not Attend.</p>	<input type="text"/>
20	<p>Select the title of the site administrator who attended this training.</p> <p>If the site administrator did not attend the required training, skip this question.</p>	<ul style="list-style-type: none"> <input type="radio"/> Principal <input type="radio"/> Assistant Principal <input type="radio"/> Dean of Students <input type="radio"/> Other <input type="text"/>
21	<p>If the site administrator did not attend their required training during the 2012 – 2013 school year, please provide an explanation.</p>	<input type="text"/>

School Safety Assessment and Prevention Team (SSAPT) Information: The purpose of this section is to report on this site's SSAPT membership and activities during the 2012–2013 school year. Joint applicants who share an SSAPT may report in this section rather than under the Joint Applicant – Partnering School(s) section.

22	How many times has your SSAPT met during the 2012–2013 school year?	<input type="text"/>
23	List the dates your SSAPT met. Example: 09.16.12 12.09.12 01.13.13 03.22.13	<input type="text"/>
24	List the name and title of the SSAPT members. Example: John Doe, Principal Mary Smith, SRO Frank Brown, Prevention Coordinator (Joint applicants: also list the site that each member represents.)	<input type="text"/>
25	List the types of data the SSAPT examined during the 2012–2013 school year AND describe how the use of those data has resulted in continuous program improvement.	<input type="text"/>

Joint Applicant – Partnering School(s): The purpose of this section is to provide school level information for partnering schools that applied jointly. The primary site's information should have already been entered. If you are not a joint applicant, skip this section and go to the Officer Information Page.

26	Site Name of Partnering School	<input type="text"/>
27	Enter your site's 9 digit CTDS number without hyphens. Example: 012345678	<input type="text"/>
28	What is the Average Daily Membership (ADM) of this site?	<input type="text"/>
29	School Level Select all that apply.	<input type="checkbox"/> High School <input type="checkbox"/> Middle School <input type="checkbox"/> Elementary School <input type="checkbox"/> Other <input type="text"/>
30	Site Administrator Name This person cannot be the officer.	<input type="text"/>
31	Title	<input checked="" type="radio"/> Principal <input checked="" type="radio"/> Assistant Principal <input checked="" type="radio"/> Other <input type="text"/>
32	Mailing Address	<input type="text"/>
33	City	<input type="text"/>
34	State (AZ)	<input type="text"/>
35	Zip Code	<input type="text"/>
36	Telephone Number Enter as: (XXX) XXX-XXXX + extension	<input type="text"/>

37	Fax Number Enter as: (XXX) XXX-XXXX	<input type="text"/>
38	Email Address	<input type="text"/>
39	Provide the name of the school Principal if the person identified as the 'Site Administrator' in question 30 is not the Principal.	<input type="text"/>
Joint Site Administrator Training Attendance: The purpose of this section is to demonstrate the training requirement for the 2012–2013 school year was met by the site administrator. Use the training checklist provided to assist in completing this section.		
40	Select the required SSP training the Site Administrator attended during the 2012 – 2013 school year. If the Site Administrator did not attend the required training, select Did Not Attend.	<input type="text"/>
41	Provide the name of the Site Administrator who attended this training. If the Site Administrator did not attend the required training, enter Did Not Attend.	<input type="text"/>

42	<p>Select the title of the site administrator who attended this training.</p> <p>If the Site Administrator did not attend the required training, skip this question.</p>	<ul style="list-style-type: none"> <input type="radio"/> Principal <input type="radio"/> Assistant Principal <input type="radio"/> Dean of Students <input type="radio"/> Other <input style="width: 50px;" type="text"/>
43	<p>If the site administrator did not attend their required training during the 2012 – 2013 school year, please provide an explanation.</p>	<div style="border: 1px solid gray; height: 60px; width: 100%;"></div>

School Safety Assessment and Prevention Team (SSAPT) Information: The purpose of this section is to report on this site’s SSAPT membership and activities during the 2012–2013 school year. Skip this section if this information was reported with the primary site as a shared SSAPT.

44	<p>How many times has your SSAPT met during the 2012–2013 school year?</p>	<input style="width: 100px;" type="text"/>
45	<p>List the dates your SSAPT met.</p> <p>Example: 09.16.12 12.09.12 01.13.13 03.22.13</p>	<div style="border: 1px solid gray; height: 60px; width: 100%;"></div>
46	<p>List the name and title of the SSAPT members.</p> <p>Example: John Doe, Principal Mary Smith, SRO Frank Brown, Prevention Coordinator</p> <p>(Joint applicants: also list the site that each member represents.)</p>	<div style="border: 1px solid gray; height: 60px; width: 100%;"></div>

47	List the types of data the SSAPT examined during the 2012–2013 school year AND describe how the use of those data has resulted in continuous program improvement.	
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Joint Applicant – Partnering School(s): The purpose of this section is to provide school level information for partnering schools that applied jointly. The primary site and one joint site's information should have already been entered. If you do not have an additional joint site, skip this section and go to the Officer Information Page.

48	Site Name of Partnering School	<input type="text"/>
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49	Enter your site's 9 digit CTDS number without hyphens. Example: 012345678	<input type="text"/>
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50	What is the Average Daily Membership (ADM) of this site?	<input type="text"/>
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51	School Level Select all that apply.	<input type="checkbox"/> High School <input type="checkbox"/> Middle School <input type="checkbox"/> Elementary School <input type="checkbox"/> Other <input type="text"/>
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52	Site Administrator Name This person cannot be the officer	<input type="text"/>
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53	Title	<input type="text"/>
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54	Mailing Address	<input type="text"/>
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55	City	<input type="text"/>
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56	State (AZ)	<input type="text"/>
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57	Zip Code	<input type="text"/>
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58	Telephone Number Enter as: (XXX) XXX-XXXX + extension	<input type="text"/>
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59	Fax Number Enter as: (XXX) XXX-XXXX	<input type="text"/>
60	Email Address	<input type="text"/>
61	Provide the name of the school Principal if the person identified as the 'Site Administrator' in question 52 is not the Principal.	<input type="text"/>
Joint Site Administrator Training Attendance: The purpose of this section is to demonstrate the training requirement for the 2012–2013 school year was met by the site administrator. Use the training checklist provided to assist in completing this section.		
62	Select the required SSP training the site administrator attended during the 2012 – 2013 school year. If the site administrator did not attend the required training, select Did Not Attend.	<input type="text"/>
63	Provide the name of the site administrator who attended this training. If the site administrator did not attend the required training, enter Did Not Attend.	<input type="text"/>
64	Select the title of the site administrator who attended this training. If the site administrator did not attend the required training, skip this question.	<input type="radio"/> Principal <input type="radio"/> Assistant Principal <input type="radio"/> Dean of Students <input type="radio"/> Other <input type="text"/>
65	If the site administrator did not attend their required training during the 2012 – 2013 school year, please provide an explanation.	<input type="text"/>

School Safety Assessment and Prevention Team (SSAPT) Information: The purpose of this section is to report on this site's SSAPT membership and activities during the 2012–2013 school year. Skip this section if this information was reported with the primary site as a shared SSAPT.

66	How many times has your SSAPT met during the 2012–2013 school year?	<input type="text"/>
67	List the dates your SSAPT met. Example: 09.16.12 12.09.12 01.13.13 03.22.13	<input type="text"/>
68	List the name and title of the SSAPT members. Example: John Doe, Principal Mary Smith, SRO Frank Brown, Prevention Coordinator (Joint applicants: also list the site that each member represents.)	<input type="text"/>
69	List the types of data the SSAPT examined during the 2012–2013 school year AND describe how the use of those data has resulted in continuous program improvement.	<input type="text"/>

Officer Information Page (one page per officer)

When completing the Officer Information Page, be certain to select the appropriate site number the officer will serve (previously designated on Site Information Page). Site names must be listed in Question #4, beginning with the primary site (see example). Please do not submit multiple pages for one officer.

Officer Contact Information																							
1	Provide the last name of the officer. <input type="text"/>																						
2	Provide the first name of the officer. <input type="text"/>																						
3	Enter the site number(s) that the officer serves. <table border="0"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td> </tr> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>	1	2	3	4	5	6	7	8	9	10	11	<input type="checkbox"/>										
1	2	3	4	5	6	7	8	9	10	11													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													
4	List, by name, the site(s) the officer serves. (list the primary site first) Example: Anytown High School; Anytown Middle School <input type="text"/>																						
5	Select Type of Officer <ul style="list-style-type: none"> <input checked="" type="radio"/> SRO <input checked="" type="radio"/> JPO 																						
6	Officer's School Phone Number Enter as: (XXX) XXX-XXXX + Extension <input type="text"/>																						
7	Officer's School Fax Number Enter as: (XXX) XXX-XXXX <input type="text"/>																						
8	Officer's School Email Address <input type="text"/>																						
9	Select the required SSP training the Officer attended during the 2012–2013 school year. If the Officer did not attend the required training, select Did Not Attend. <ul style="list-style-type: none"> <input checked="" type="radio"/> On the Mark with the School Safety Program: New Officer Training <input checked="" type="radio"/> AZFLSE LRE Advanced Academy <input checked="" type="radio"/> Did not attend 																						

10	If the Officer did not attend one of the above trainings in the 2012–2013 school year, please provide explanation.	
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Summer/Intersession: Complete this section ONLY if you were approved for an 11– or 12– month position in FY 2013 and the site and officer are again requesting funds for a position that extends beyond 10 months. If the officer will serve no more than a 10 month position, select 'No' for Question #11 and skip Questions #12–15.

11	Do the site and officer request funding for a position that serves the school for more than 10 months? If yes, you must complete the rest of this section. If no, proceed to the next section.	<table style="width: 100%;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> </tr> </table>	Yes	No	<input checked="" type="radio"/>	<input checked="" type="radio"/>
Yes	No					
<input checked="" type="radio"/>	<input checked="" type="radio"/>					

12	How many months of service are being proposed?	<table style="width: 100%;"> <tr> <td style="width: 50%;">11 Months</td> <td style="width: 50%;">12 Months</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> </tr> </table>	11 Months	12 Months	<input checked="" type="radio"/>	<input checked="" type="radio"/>
11 Months	12 Months					
<input checked="" type="radio"/>	<input checked="" type="radio"/>					

13	Will teachers and students be present during intersession or summer break?	<table style="width: 100%;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> </tr> </table>	Yes	No	<input checked="" type="radio"/>	<input checked="" type="radio"/>
Yes	No					
<input checked="" type="radio"/>	<input checked="" type="radio"/>					

14	What duties will the officer perform?	<input type="checkbox"/> Implement LRE <input type="checkbox"/> Conduct school safety assessments <input type="checkbox"/> Review and update school safety plan <input type="checkbox"/> Provide or attend school in–service training <input type="checkbox"/> Attend professional development trainings <input type="checkbox"/> Analyze and develop strategies to address campus related criminal incident <input type="checkbox"/> Other <input style="width: 50px;" type="text"/>
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15	Provide a detailed description, around each item indicated above, of the summer/intersession plan that has been developed between the site administrator, officer, and supervisor.	
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Agency Supervisor Information. All information must be that of the police or probation department supervisor.

16	Supervisor Name	<input type="text"/>
17	Title	<input type="text"/>
18	Agency	<input type="text"/>
19	Agency Mailing Address	<input type="text"/>
20	City	<input type="text"/>
21	State (AZ)	<input type="text"/>
22	Zip Code	<input type="text"/>
23	Supervisor's Phone Number Enter as: (XXX) XXX-XXXX + Extension	<input type="text"/>
24	Supervisor's Fax Number Enter as: (XXX) XXX-XXXX	<input type="text"/>
25	Supervisor's Email	<input type="text"/>
26	Select the required SSP training the Agency Supervisor attended during the 2012-2013 school year. If the Supervisor did not attend the required training, select Did Not Attend.	<input type="text"/>
27	If the Agency Supervisor did not attend a SSP training during the 2012-2013 school year, please provide an explanation.	<input type="text"/>

Officer Turnover: Please list all officer's that served this site during the current grant cycle (July 2011 - current).

28	<p>List each officer (first name, last name) that served at this site during the current grant cycle (July 2011 - current), the dates each officer served and the reason for leaving. For the current officer, list the name, date and 'current.'</p> <p>Example: John Doe, July 2011 - September 2012, promotion Jane Doe, September 2012 - current</p>	<div style="border: 1px solid gray; width: 100%; height: 100%;"></div>
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Change in Officer: Complete this section ONLY when a new officer is assigned after this application has been submitted and approved. The Officer Supervisor section must also be amended if the new officer has a supervisor other than the one already entered.

29	New Officer's Last Name	<input style="width: 95%;" type="text"/>
30	New Officer's First Name	<input style="width: 95%;" type="text"/>
31	New Officer type	<input checked="" type="radio"/> SRO <input checked="" type="radio"/> JPO
32	New Officer's School Phone Number Enter as: (XXX) XXX-XXXX + Extension	<input style="width: 95%;" type="text"/>
33	New Officer's School Email Address	<input style="width: 95%;" type="text"/>
34	Does this new officer have a supervisor other than the one already entered? If yes, please amend the Officer's Supervisor Information section of this page.	<input checked="" type="radio"/> Yes <input checked="" type="radio"/> No
35	New Officer's Start Date Enter as: MM/YYYY	<input style="width: 95%;" type="text"/>