

Officer: _____ 10 month 11/ 12 month District: _____

Site(s): _____



**School Safety Program
FY 2015 Cooperative Agreement**

April 15, 2014

We, the undersigned, acknowledge we will coordinate and cooperate in the School Safety Program if funds are awarded. By signing this agreement we also give our assurance of the following items:

- We are in agreement with the budget submitted
- We will uphold the intent of the grant, which includes but not limited to:
 - Provide for 180 hours of law-related education
 - Ensure full-time officer presence on campus during school hours consistent with grant requirements
 - Maintain weekly activity logs completed by the officer and submitted and monitored by the school administrator and agency supervisor
 - Facilitate access to appropriate educational records and data to officers in accordance with FERPA
 - Utilize a multidisciplinary School Safety Assessment and Prevention Team that meets quarterly for safety needs assessment, program planning, and continuous improvement
- We understand that, to the best of our ability, we are committed to ensuring officer continuity over the duration of the three-year grant cycle
- We understand that schools are prohibited from having more than three officers within a three-year cycle
- We will share the program design and operational plan with the assigned officer
- We will enter into a Service Agreement (or IGA)
- We understand each party's responsibility under the program

Print Name: _____
School Principal(s)

Signature: _____

Print Name: _____
District Superintendent

Signature: _____

Print Name: _____ Title: _____
Authorized Local Law Enforcement Agent/ Authorized County Juvenile Probation Agent

Signature: _____

Agency: _____