



STATE OF NEVADA
COMMISSION ON PEACE OFFICERS' STANDARDS AND TRAINING
Records and Certification Section
 5587 Wa Pai Shone Avenue
 Carson City, Nevada 89701
 (775) 687-7678*Fax (775) 687-4911

MANAGEMENT CERTIFICATE APPLICATION
Refer to NAC 289.260 for certificate requirements

Last Name _____ First Name _____ Middle _____
 POST ID# _____
 Residence Address (not agency address)
 Street _____ City _____ State _____ Zip _____
 Agency Name _____ Agency ID# _____ Hire Date _____

1. Is the applicant currently in a Management position as defined by NAC: Yes No Date appointed _____
Management position definition per NAC: "Management level position" means a position held by a peace officer in which the peace officer supervises two or more persons who are first-line supervisors or who hold a position above the level of a first-line supervisor.
 2. Is this a temporary appointment? Yes No Date appointed _____
 3. A current supervisor certificate. Yes No
 4. Six years of experience as a peace officer, including at least 1 year of experience in a management level position and a current assignment in a management level position. Yes No
 5. Organizational Chart attached Yes No
 6. Letter attached describing the manner in which the applicant's current assignment meets the criteria for a Management level position as set forth in regulation (See definition above). Yes No

COLLEGE CREDIT DOCUMENTATION

(Copies of official transcripts required)

Subject Term/Yr College Credits

3 Credits Any Subject				
3 Credits Any Subject				

Please itemize and include support documents of the training to include dates, college terms/quarters and hours in each area below

200 HOURS –MANAGEMENT / SUPERVISION TRAINING

Inclusive of the following or their equivalent

- (a) Introduction to management; (c) Financial administration; (e) Management and labor relations; (g) Policy formulation.
 (b) Public administration / business administration; (d) Personnel administration; (f) Supervision; and

Only list college courses that were passed. College credits are converted at a ratio of 15 hours for each college credit.

Course Topic	Date / College Term	Provider / College (include credits)	Hours

NOTE: If the space provided for documenting the training is not sufficient, please attach a supplemental listing of training to this application. Total

Single Point of Contact				
	Name	Signature	Title	Date
Agency Administrator or Designee				
	Name	Signature	Title	Date

POST USE ONLY – DO NOT WRITE IN THIS SPACE

Date Reviewed _____ Reviewed By _____ Approved Denied
 Data Entry _____

