



The Fiscal Year 2023-2024 **NJSACOP LAW ENFORCEMENT ACCREDITATION COMMISSION [NJSACOP LEAC] Grant Program** is making funds available to be used for the support of *non-accredited law enforcement agencies* in their pursuit of attainment of NJSACOP LEAC accreditation.

The **NJSACOP LEAC** will fund multiple awards to eligible law enforcement agencies in New Jersey. Awards will cover the initial costs **NJSACOP LEAC** Accreditation for up to three years, or until attaining accredited status, whichever comes first. The agency must agree to assume applicable reaccreditation fees following initial accreditation.

The mission of the **NJSACOP LEAC** is to promote and enhance the highest ethical and professional standards in law enforcement at all levels throughout New Jersey by providing the opportunities and tools required to agencies and their personnel to successfully attain and retain NJSACOP LEAC accreditation. The accreditation process works to improve agency performance and transparency, while ensuring adherence to accepted best practices and professional standards.

GRANT APPLICATION

1. All applicants are required to explain their inability to address pursuit of NJSACOP LEAC accreditation without this award.
2. Letter from agency head explaining the agency's plan to obtain necessary support and continue the program following the conclusion of **NJSACOP LEAC Grant Program** award support.
3. Identify and secure the source(s) of funding that your agency plans to utilize to continue the program following the conclusion of **NJSACOP LEAC Grant Program** award support.
4. Complete and submit **NJSACOP LEAC Grant Program** application documents.

DUPLICATION OF FUNDING DISCLOSURE

Applicants are required to disclose whether they have pending applications for federally funded assistance or active federal awards that support the same or similar activities or services for which funding is being requested under this application. **NJSACOP LEAC Grant Program** funds may not be used for the same item or service funded through another funding source.



APPLICATION

Agency Name:

Agency Address:

Street

City

Zip

Chief Executive Officer:

Phone Number:

Email:

Accredited Status:

Has your department ever been accredited by a state or national accreditation program? Y / N

Agency Size:

Current Number of Sworn Personnel:

Number of Authorized Sworn Personnel:

Number of Authorized Non-Sworn Personnel:

Please explain your agency’s inability to address pursuit of **NJSACOP LEAC** accreditation without receipt of this award. (attach additional document)

Please provide proof of authorization from your jurisdiction’s supervising administrator to pursue accreditation (attach additional document).

Please explain your agency’s plan to obtain necessary support and continue the pursuing reaccreditation following the conclusion of **NJSACOP LEAC Grant Program** award support. (attach additional document)

I understand that should my agency receive funding through the **NJSACOP LEAC Grant Program**, my agency is committed to successfully completing the accreditation process, and I further understand that my agency will be obligated to reimburse the **NJSACOP LEAC** for all funds received from the **NJSACOP LEAC Grant Program** if my agency fails to successfully receive NJSACOP LEAC Accreditation and initial NJSACOP LEAC Re-Accreditation.

Agency Name:

Agency Chief Executive:

Signature:

Date:

Please complete the form, and forward with all appropriate attachments to: NJSACOP Law Enforcement Accreditation Commission, 751 Route 73 North, Suite 12, Marlton, NJ 08053