



SPOKANE COUNTY SHERIFF'S OFFICE
TRAINING ANNOUNCEMENT



Basic Police Motorcycle School



DATE: May 14th – 25th, 2012 (excluding weekends)

LOCATION: **CLASSROOM ON DAY 1**
Spokane County Fire District 10 Fire Station
929 S. Garfield
Airway Heights, WA 99001

PRACTICAL PORTION
Spokane County Motorsports Park
750 N. Hayford Rd
Airway Heights, WA 99001

COST: **FREE**

STUDENTS: **MAX – 20 MIN - 8**

DESCRIPTION:

This course is designed to develop coordination, balance, control, and the confidence necessary for proficient operation of the police motorcycle, and to familiarize participants with the handling characteristics of their police motorcycle. This class is designed for both new riders for certification, and for experienced riders who want to improve their skills, or recertify.

If you are already an instructor and wish to assist with teaching, please notify Deputy John Oliphant (contact information is below).

An equipment list will be sent to you with your confirmation to attend around 4 weeks prior. Please make sure you have a dependable, department issued motorcycle to ride during the school. Motorcycle endorsement is required.

REGISTRATION:

Students must register by **April 26th, 2012**. To register, please complete the attached registration form and return it to Deputy John Oliphant, SCSO Training Unit, 1100 W. Mallon, Spokane, WA 99260. Registrations can also be faxed to (509) 477-6975 or emailed to Deputy John Oliphant at jroliphant@spokanesherriff.org. Any questions can be directed to him at (509) 477-3211.



Spokane County Sheriff's Office – Training Unit

Revised 2/09

Application Form
GENERAL COURSE APPLICATION

PLEASE TYPE OR PRINT CLEARLY

1. GENERAL INFORMATION

Applicant's Name: (Last) (First) (Middle)

Title/Rank: Applicant's Personnel Number: Male Female

Primary Duty Assignment: Agency:

Agency Phone: Agency Fax: Applicant's Agency E-Mail Address: @

Agency Mailing Address: (Street or PO Box) (City) (Zip)

IF THIS APPLICANT REQUIRES SPECIAL CLASSROOM ACCOMODATION, PLEASE MAKE REQUEST ON A SEPARATE SHEET AND ATTACH TO THIS APPLICATION.

2. COURSE INFORMATION

Course Title: Location of Course:

Course Date(s):

3. MEALS AND LODGING

Meals and Lodging and any costs incurred during this course will be the sole responsibility of the applicant and/or their agency.

4. **MANDATORY-MUST BE COMPLETED TO BE CONSIDERED FOR SELECTION**

In determining eligibility of this applicant, the Spokane County Sheriff's Office will consider any special need or purpose which the applicant or his/her agency may have regarding the requested course or training. Comments:

5. **APPLICANT PRIORITY (MANDATORY!)**

If submitting more than one application for this course, check the priority of THIS applicant: 1 2 3 4 5

6. **TRAINING COORDINATOR EMAIL ADDRESS (MANDATORY!)**

@ Confirmation is sent via email, please make sure this section is complete.

7. AUTHORIZATION

Agency Representative Authorizing Attendance: Name Title Signature Date For SCSO Use Only

Return completed application form to: Spokane County Sheriff's Office Training Center, 10319 E. Appleway, Spokane Valley, WA 99206. Applications may also be faxed to (509) 477-6975 or sent as an email attachment to roliphant@spokanesherriff.org. For more information regarding the application process, please call (509) 477-3211.