

OKLAHOMA STATE BUREAU OF INVESTIGATION

ALAUNNA RAFFIELD SCHOLARSHIP TRAINING APPLICATION

APPLICANT'S NAME: _____ AGENCY: _____

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DATE OF APPLICATION: _____ CLASS DATE: _____ through _____

Present level education: ____ H.S./GED ____ Associates ____ Bachelors ____ Masters ____ CLEET CERT

State your current work duties and give a brief description of those duties.

Describe the training requested, reason to attend, learning objectives, and costs (registration, perdiem, lodging).

Briefly, describe your law enforcement experience.

Applicants must sign below and return to an OSBI Captain in your region. OSBI Captain must rank the applicants and return the application to the Director of Investigations. Applications may be handwritten or submitted online.

Applicant Signature: _____ Date: _____

Captain Signature: _____ Date: _____

FOR TRAINING USE ONLY

Approved ____ Denied ____ Captain Ranking: _____

Training Officer Signature: _____ Date: _____