NORTH EAST MULTI-REGIONAL TRAINING, INC.

1717 PARK STREET., SUITE 303, NAPERVILLE, IL 60563
OFFICE: (630) 896-8860 • FAX: (630) 229-0206
Website: www.nemrt.com

"Committed to the Career Development and Professionalization of Law Enforcement Officers"

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Lincolnshire Police Department

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Mr. Chuck Hervas, Esq.
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November 23, 2027

Chief / Training Coordinator

The next NEMRT part-time academy at will begin on April 17, 2027. Power testing to be held on 3/27/2027 & 4/3/27, and **date will be assigned as registration takes place**. Enrollment / acceptance of registration documents will not be effective until January 25, 2027. Enrollment will be accepted on a first-come, first-served basis. Slots cannot be reserved in advance. All documents must be completed except for the medical waiver for you to secure your recruit's spot. Documents can be scanned / emailed to me at bill@nemrt.com. Tuition for each recruit is $2,200 but can be reimbursable through ILETSB.

Enclosed is all the paperwork needed to register for the upcoming Part Time Basic Law Enforcement Academy class. If you are thinking about sending multiple recruits, then please contact me first.

*Pre-registration PTBLEA 4-27
*Pre-registration power test
*Certification of recruit background
*Form E copy **with a PTBID number**
*Indemnification
*Initial enrollment
*Medical waiver form once we are within the 60-day window of academy date

Please electronically file a Form E. Send copies of all the above forms, including a copy of Form E, back to me along **with a PTBID number**.

Please be aware that the medical waiver must be signed and dated by a physician. Medical waivers are only good for 60 days prior to the start date of the academy start date (April 17, 2027). **Medical waivers must be emailed to me ahead of time before the power test**.

All registration paperwork MUST be submitted no less than 5 business days prior to the date of ALL POWER testing. No registrations will be accepted without a COMPLETE SET of paperwork for the officer.

Recruits should be prepared to attend almost every weekend each month during the duration of the part-time police academy.

Mandatory orientation date, and first day of the academy at Triton College, is April 17, 2027. All recruits must attend orientation, and no make-up dates are allowed. Feel free to contact me with any questions or concerns at bill@nemrt.com or 630-896-8860 ext. 108.

Sincerely,

Bill Collins
NEMRT Part-Time Academy Coordinator

INITIAL
ENROLLMENT FORM

PART-TIME ILLINOIS LAW ENFORCEMENT OFFICER
BASIC TRAINING

Part-Time Law Enforcement Officer's Name:_____

Name and Address of Law Enforcement Agency Employed by:

_____

_____

_____

Agency Telephone Number: _____

Date of Birth: _____

PTB ID Number: _____

Mobile Team Unit Number : _____

Is your Law Enforcement Agency a paid member of the above Mobile Team Unit YES NO (Circle one)

If you have not submitted the Board's required Form E(employment form) on this Part-Time Law Enforcement Officer, you MUST attach a completed form with this enrollment request.

I certify and authorize this part-time officer who is sworn and employed by this Illinois law enforcement agency to enroll in the Board's approved Part-Time Law Enforcement Officers Basic Training course.

The above named Officer has been subjected to a criminal and character background investigation, including the use of fingerprint cards processed through the Illinois Department of State Police and the Federal Bureau of Investigation and such investigation has revealed no felony conviction or crime involving moral turpitude (attach any arrest record). Moreover, the investigation has verified that the Officer is of good character.

_____ _____

Chief Administrator of the Agency Date

*NOTE: In reviewing this enrollment request, the Board reserves the right, and may in fact, request additional information.

Illinois Law Enforcement Training and Standards Board

JB Pritzker, Governor
Brent Fischer, Executive Director

Phone: 217/782-4540
Fax: 217/524-5350
TDD: 866-740-3933

Academy Entrance Standard Basic Training
Certification of Recruit Background

Pursuant to Illinois Police Training Act (50 ILCS 705/6) each Illinois police agency and applicant applying for admission to the Police Training Board's Local Law Enforcement Basic Training Academy shall provide certification that the applicant has not committed any felony or a crime involving moral turpitude, and is a person of good character. This requirement and standard must be satisfied before consideration of acceptance into the academy.

Statement of Applicant

Under penalty of perjury, decertification, and disqualification, I certify that I have no prior felony conviction and no conviction involving a crime of moral turpitude.

_____	_____
Date	Applicant's Signature
_____	_____
_____	_____
Name and Address of Agency	Applicant's Home Address

Criminal and Character Background Investigation
Statement of Agency

The above applicant has been subject to a criminal and character background investigation by this agency, including the use of fingerprint cards processed through the Department of State Police and the Federal Bureau of Investigation, and such investigation has thus far revealed no prior conviction of a felony, qualifying misdemeanor, or crime involving moral turpitude. Moreover, the investigation has verified that the applicant is of good character.

_____	_____
Date	Authorized Signature of Appointing Authority

THIS FORM MUST BE SIGNED ON BEHALF OF APPOINTING AUTHORITYAND SUBMITTED UNDER PENALTY OF LAW TO THE ACADEMY FOR LOCAL LAW ENFORCEMENT OFFICERS BASIC TRAINING.

Illinois Law Enforcement Training and Standards Board

Medical Certificate
Law Enforcement Pre-Test Peace Officer
Wellness Evaluation Report (P.O.W.E.R.)
Physical Fitness Exam

Recruit's Printed Name_____

Dear Physician/Physician's Authorized Representative:

This person is being considered for enrollment in the Law Enforcement Pre-Service Peace Officer Wellness Evaluation Report (POWER) Physical Fitness Exam. Laws providing compensation for injuries make it imperative that this certificate be accurate and complete. This medical certificate will be used to decide whether the person under consideration is physically qualified for admission to the Law Enforcement Pre-Service Peace Officer Wellness Evaluation Report (POWER) Physical Fitness Exam. Failure to report your findings in this examination might cause this individual great inconvenience.

The physical activity in successive order at the Law Enforcement Pre-Service P.O.W.E.R. Physical Fitness Exam includes measuring flexibility though the sit and reach test, performing a series of sit-ups in one minute, lifting in a bench press and running 1.5 miles under a certain time, depending on the age of the person.

All Basic Law Enforcement students are required to participate in a physical conditioning program which consists of the following physical activities; walking, running (2-5 miles per day), stretching, strength exercises, grip-strength exercises, push-ups, chin-ups, sit-ups and agility drills.

All Basic Law Enforcement students are required to participate in firearms and defensive tactics training which involves; manual dexterity with both hands, punching and blocking drills, and physical takedowns.

The fee for your examination will be paid for by the individual or the department for whom he/she is employed. Electrocardiogram, chest x-ray and blood tests are not necessary unless your examination indicates such tests are desirable or necessary.

Please Complete the Following:

The Examinee (___) is (___) is not qualified to participate in the above described physical training.

_____ (____)_____
Physician's Name (printed) Phone

_____ _____
Physician/Authorized Representative's Signature Date

This form must be completed and returned to the Academy prior to recruit testing.

North East Multi Regional Training, Inc. MTU#3

1717 Park Street, Suite 303
Naperville, IL 60563
Phone:(630)896-8860
Fax:(630)896-4422

PRE-REGISTRATION / CANCELLATION FORM

INSTRUCTIONS

Please use a separate form for each class.
Please complete the form in its entirety, including Social Security Numbers.
Please check the appropriate Pre-Registration or Cancellation box below.
If you have any questions, please contact our Basic Training Manager at ext.108
If a student is covered under the Americans with Disabilities Act., please contact Deputy Director Shelley Cooker. We can then assess what "reasonable accommodations" may be necessary.

☐ Please process the following pre-registration: ☐ Please cancel the following pre-registration:

Today's Date: _____

Your Agency: _____ Phone: _____

Course Title: PTBLEA POWER Test Program #: Power

Course Location: Crestwood Wellness and Recreation Center 5331 135th St Crestwood, IL 60445 Course Date: **Will be assigned Based on #'s**

Students to be enrolled:

Last Name	First Name	Last 4 digits of S.S.# **(Required)**	Attended Previous NEMRT Training (y/n)

I authorize the above student(s) to attend this program and ensure that he/she has met all prerequisites listed in the course description:

Authorized Signature: _____ Date: _____

Title/Rank: _____

Indemnification Agreement

It is hereby agreed that in consideration of one of it's employees,

_____

(Name of Officer)

being granted the opportunity of participating and engaging in police training, operations, functions, and other activities sanctioned by North East Multi-Regional Training, Inc., the

_____

Officer's Sponsoring Agency)

employing the above named trainee shall hold North East Multi-Regional Training, Inc. and all its affiliates and host sites harmless as to any injuries or damages incurred by said trainee as a result of such police training, operations, functions and other activities sanctioned by North East Multi-Regional Training, Inc., regardless of fault or negligence on the part of any official or employee of North East Multi-Regional Training, Inc. or its affiliates, and shall further agree to indemnify North East Multi-Regional Training, Inc. and all its affiliates in full amount as to any judgment or claim awarded to said police trainee, his/her heirs, dependents, and assigns such injuries or damages sustained by said trainee during official course of his temporary assignment to the North East Multi-Regional Training, Inc. **Part Time Basic Law Enforcement Academy.**

It is further agreed that, should suit or claim be filed by said trainee alleging injury of damage as a result of said training, operations, functions, or other activities sanctioned by North East Multi-Regional Training, Inc., reasonable notice of such suit or claim will be given to the employing Department or Agency of the affected trainee and said Department or Agency will appear and defend North East Multi-Regional Training, Inc. and its affiliates.

IN WITNESS THEREOF, the undersigned has affixed his hand and seal

at _____, Illinois,

(City of Sponsoring Agency)

this_____ day of _____, A.D., 20_____.

_____

Signature

_____

Type or Print Name

_____

Title or Office

Note: This agreement must be signed by an official of the local government entity or by an official of the agency involved who has the legal power to enter into such an agreement.

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☐ Please process the following pre-registration: ☐ Please cancel the following pre-registration:

Today's Date: _____

Your Agency: _____ Phone: _____

Course Title: Part Time Basic Law Enforcement Academy Program #: **PTBLEA 4-27**

Course Location: Triton College River Grove, IL Course Date: **APRIL 17, 2027**

Students to be enrolled:

Last Name	First Name	Last 4 digits of S.S.# **(Required)**	Attended Previous NEMRT Training (y/n)

I authorize the above student(s) to attend this program and ensure that he/she has met all prerequisites listed in the course description:

Authorized Signature: _____ Date: _____

Title/Rank: _____