

# OHIO LAW ENFORCEMENT K9 ASSOCIATION

"To improve K-9 use, training and confidence by forming partnerships  
from multi jurisdictions around the state."

## K9 PROTECTIVE VEST / EQUIPMENT / TRAINING GRANT

### REQUIREMENTS

All applicants for a Grant must be a Regular Active member of OLEKA. Your membership must be in good standing and paid for the current year of the application. The applicant agency Supervisor, Chief and officer must sign the application recognizing that the following conditions must be met:

1. Must be an Active Member on OLEKA with dues paid up to date.
2. Must have a K9 that is at least 1 ½ years old. (K9 Vest Applicants Only)
3. (Vest Grant) Must actively partake in a promotional effort by volunteering time at a minimum of one OLEKA promotional activity for your K9 equipment application.
4. (Vest Grant) Must perform a minimum of one K9 demonstration for OLEKA at a time and place convenient for the fundraising effort and the Officer.

### FILL OUT ALL THAT APPLY (Print or Type)

Name of Department: \_\_\_\_\_

Department Address: \_\_\_\_\_

Department Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Chief of Police/Sheriffs Name: \_\_\_\_\_

K-9 Unit Supervisor: \_\_\_\_\_

K-9 Team Requesting Equipment (if known): \_\_\_\_\_

Size of K-9 Unit: \_\_\_\_\_

Number of K-9 Usages Yearly: \_\_\_\_\_

Year and Make of Cruiser to Receive Equipment: \_\_\_\_\_

Who will be installing the equipment? \_\_\_\_\_

Will this equipment become a registered asset of your department? \_\_\_\_\_

GRANT IS FOR: (Check one)

K9 Protective Vest Grant

Equipment Grant

Training Grant

K9 Medical

OLEKA Grant number: \_\_\_\_\_ (Get this from the website) MUST HAVE

Name of the Grant: \_\_\_\_\_

How did you hear about this grant? \_\_\_\_\_



It should be known to the applicant agency that OLEKA reserves the right to make a professional news release of the grant provided herein.

OLEKA also reserves the right to hold the vest until such time that the K9 handler or representative of the agency attends an OLEKA meeting to receive the K9 Protective Vest or Equipment. By signing this you waive any prohibitions of taking photos during the promotional or presentation and further waive OLEKA's discretion to use the photos as a tool promoting and advertising the K9 Protective Vest program or Equipment Program. Failure of the applicant to follow any rule (1 - 3) OLEKA reserves the right to terminate the applicant's grant application and issue the grant to another qualified applicant. **In no way does this guarantee any agency or person any monetary funds if a K9 Protective Vest or Equipment is not issued.**

**The grant process is subject to available funding. Applicant may appeal to the executive board any grant termination by writing a letter of appeal and sending to the Executive Board.**

Incomplete grant forms will not be processed for approval. Please make sure you have all applicable blanks completed with all signatures on form.

Signature of Applicant: \_\_\_\_\_

Signature of K-9 Unit Supervisor: \_\_\_\_\_

Signature of Chief of Police/Sheriff: \_\_\_\_\_

*(Agency Chief, Sheriff, or leader is the signature that must be notarized.)*

(Notary Seal)

Notary Signature: \_\_\_\_\_

Notary Printed Name: \_\_\_\_\_

My Commision Expires: \_\_\_\_\_, 20\_\_\_\_\_

**OLEKA USE ONLY**

**Executive Board Approval**

		Approved
OLEKA PRESIDENT _____	Date _____	Y N
OLEKA VICE PRESIDENT OPS _____	Date _____	Y N
OLEKA VICE PRESIDENT TRG _____	Date _____	Y N
OLEKA TREASURER _____	Date _____	Y N
OLEKA SECRETARY _____	Date _____	Y N

Processing time for the grant application may take up to 6 months for approval

**Send Completed Application Postmarked no later than the ending date of the grant.**

**OLEKA**

**PO Box 104 New Lebanon, OH 45345**