

Additional General/Background Information

I. General Information

Applicant Agency ORI Number: Stringa

Are you contracting for law enforcement services? ☒ Yes ☐ No

In the space below, please provide a brief description of your agency's inability to implement this project without federal assistance

II. Executive Information

Law Enforcement/Program Official Title and Name:

Title:

Name:

Law Enforcement/Program Official Telephone: Fax:

Law Enforcement/Program Official Email:

Government Executive/Financial Official Information:

Name:

Title:

Name of Government Entity:

Address:

City:

State:

Zip Code:

Telephone: Fax:

Email:

Type of Government Entity: State Other:

III. Partner Information (if applicable)

Name:

Title:

Name of Partnering Entity:

Address:

City:

State:

Zip Code:

Telephone: Fax:

Email:

IV. Department Information

*** Do officers have primary law enforcement authority for the population to be served? ☒ Yes ☐ No**

If yes, what is the actual population for which your department has primary law enforcement authority?

(In other words, the 2000 Census population minus the incorporated towns and cities that have their own police departments)

999999999

If no, please explain below.

Population served (2000 US Census) 999999999

Square Miles Covered: 99999999

Current budgeted locally funded sworn force strength as of the date of this application

FT 99999 PT 99999

Current actual locally funded sworn force strength as of the date of this application

FT 99999 PT 99999

What is the total number of new officer positions for which you are now requesting under this COPS in Schools Application?

FT 999 PT 999