

# *Novak Scholarship Program*

offered by the

## **ILLINOIS ASSOCIATION OF CHIEFS OF POLICE**

to attend

### *The School of Police Staff and Command, Northwestern University Center for Public Safety*

#### **JACOB J. NOVAK SCHOLARSHIP APPLICATION**

The policy of the Illinois Association of Chiefs of Police is to provide administrative staff and command training to interested and qualified police departments and their personnel who, due to limited local resources, are unable to acquire such training, through the Jacob J. Novak Scholarship.

The Jacob J. Novak Scholarship of the Illinois Association of Chiefs of Police is dedicated to the enhancement of the law enforcement profession within the State of Illinois. This award is so named in honor of the first Executive Secretary-Treasurer of the Association and former Chief of the North Chicago Police Department.

The scholarship shall provide the funding necessary to cover expenses of tuition, study materials, food and lodging for candidates selected to attend the 10-week School of Police Staff and Command of Northwestern University's Center for Public Safety in Evanston, Illinois.

The Institute, in cooperation with the Association, will contribute one-half of the tuition and study material costs normally charged for this program.

As chief, I nominate the following candidate for the Jacob J. Novak Scholarship:

<b>CANDIDATE'S PERSONAL DATA</b>	
Last Name First Middle	Rank
Department Address County	Office Phone
City State Zip Code	Social Security Number
Home Address	Home Phone
City State Zip Code	Date of Birth

As a requisite for this candidate being considered for this scholarship, I provide the following information:

<b>CANDIDATE'S LAW ENFORCEMENT OR PROFESSIONAL EXPERIENCE</b>		
Name & Address of Agency	Dates of Employment	Rank or Position (Brief summary of duties)
1.		
2.		
3.		

<b>CANDIDATE'S LAW ENFORCEMENT TRAINING</b>		
<b>Do not include basic police school or in-service training which all of your candidates regularly repeat each year.</b>		
Name of School/Course Title:	Number of Hours	Date Completed

Kinds of licenses or certificates (for example, breath alcohol, polygraph, medical, nurse, pharmacy, psychologist, public accountant, social worker, etc.)


<b>CANDIDATE'S EDUCATION</b>		
<u><b>HIGH SCHOOL</b></u> CIRLE NO. YEARS COMPLETED:  0 1 2 3 4 GRADUATED? YES NO	<u><b>GED</b></u>  RECEIVED GED CERTIFICATE? YES NO	<u><b>COLLEGE - UNIVERSITY</b></u>  CIRLE NO. YEARS COMPLETED:  0 1 2 3 4 5 6 7 8 GRADUATED? YES NO
Name and City of High School Attended:	Date of Graduation:	

If candidate did not complete high school, explain below. If GED was earned, describe where and when.


Name of College or University Attended	Name of Major	Dates Attended	Degree Awarded (If none, list credit hours completed.)

**CANDIDATE'S SPECIAL QUALIFICATIONS OR SKILLS**

Indicate pertinent information, such as volunteer activities, special skills, courses taught, knowledge of computers or foreign languages, publications, and membership in professional organizations, etc., which merit consideration during the selection process.


All candidates must satisfy the requirements listed below to be eligible for selection. A request for a waiver must accompany this application if any requirement is not met.

- Full-time employee on active duty with an Illinois law enforcement agency.
- Agrees to remain with agency following graduation for minimum of three years.
- No physical restriction to interfere with completion of program.
- Application fully completed (do not omit any part; attach additional sheets, if necessary; type or print.)
- Resume, including summary of past and present police assignments, date of appointment and promotions, is attached to this application.

**CANDIDATE'S CERTIFICATION FOR THE NWUCPS, SCHOOL OF POLICE STAFF AND COMMAND**

I certify that all the information provided in this application is true, complete, and correct to the best of my knowledge and belief. I am a full-time employee on active duty with my department. Following graduation from this program, I agree to work for my department for a minimum of three years. I have no physical restrictions that will interfere with my completion of this program.

Signature of Applicant	Date
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## CHIEF'S STATEMENTS

As a Chief of an established Illinois law enforcement agency, I hereby nominate \_\_\_\_\_, a sworn and currently active officer in my department, for the **Jacob J. Novak Scholarship**. The officer is in, or being considered for, a supervisory, managerial or administrative position and, if selected for this award, will be granted a leave of absence (or equivalent temporary status) on full salary for the 10-week period while attending the School of Police Staff and Command program conducted by the Center for Public Safety, Northwestern University.

1) I cannot use conventional funding sources to pay for this candidate to attend this program because:


2) The candidate's graduation from this program would benefit my department in the following ways:


3) Upon successful graduation from this program, I intend to use this candidate's new knowledge and skills specifically to:


4) Within the past five years, the following current employees in my department have completed courses or programs of content and time commitment similar to and including the School of Police Staff and Command:

Employee's Name:	Course Title:	Location:	Weeks in Length & Dates:

5) Annual police agency budget for the last three years (total):

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6) Annual training budget for the last years:

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7) Current sworn and civilian strength (broken down accordingly):

<u>Sworn:</u>	<u>Civilian</u>
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I also understand it is the Association's intention to fund a qualified candidate to attend the School of Police Staff and Command scheduled to commence on or about April 1 and October 1 of each year. Requisite information including the nominee's resume shall be submitted to the Association's Scholarship Subcommittee not later than close of business on May 1st of that application year. Presentation of Scholarship will be made at the ILACP Annual Conference. Nominees not selected may be considered for future programs within a two (2) year period upon receipt of a letter from the nominating Chief requesting such future consideration.

**Program Preferred: April, 20\_\_    October, 20\_\_**

<b>CHIEF'S RECOMMENDATION</b>			
I have examined this application, verify that it is made in good faith, and recommend the candidate for scholarship.			
Signature	Position	Date	Chief's phone # w/area code

### **INSTRUCTIONS**

1. Use typewriter if available. Otherwise, print clearly in dark ink. If extra space is needed, attach additional sheets.
2. All data must be furnished in detail as requested. The information you give will be used to determine qualifications as a candidate.
3. If an item does not apply, write in the letters "N.A." for Not Applicable.
4. This form must be completed by the candidate and chief.
5. A final decision will be reported to the chief in writing by the Executive Director of the Illinois Association of Chiefs of Police or the Chairman of the ILACP Training Committee.

All correspondence relating to the scholarship application should be mailed to:

**The Executive Director  
 Illinois Association of Chiefs of Police  
 426 South Fifth Street  
 Springfield, IL 62701-1824**

(217) 523-3765  
 Fax (217) 523-8352  
 (website) [www.ilchiefs.org](http://www.ilchiefs.org)  
 (e-mail) [ilacp@ilchiefs.org](mailto:ilacp@ilchiefs.org)