

**LAW ENFORCEMENT TRAINING DIRECTORS ASSOCIATION OF NEW YORK STATE  
MEMBERSHIP / RENEWAL APPLICATION**

**\*\* Renewals need only fill in name and any changes from previous roster \*\***

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

Telephone: Work: \_\_\_\_\_ Fax: \_\_\_\_\_ Home: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Check **all** appropriate categories:

Application for:

Position held:

ACTIVE MEMBERSHIP

\_\_\_\_\_ New  
\_\_\_\_\_ Renewal

\_\_\_\_\_ Training Director  
\_\_\_\_\_ Designated Assistant  
\_\_\_\_\_ Instructor  
\_\_\_\_\_ Retired Member  
\_\_\_\_\_ Other

ASSOCIATE MEMBERSHIP

\_\_\_\_\_ New  
\_\_\_\_\_ Renewal

CORPORATE MEMBERSHIP - \_\_\_\_\_

DUES: ACTIVE / ASSOCIATE MEMBERSHIPS: NEW OR RENEWAL \$ 40.00 \*\*

CORPORATE MEMBERSHIP: NEW OR RENEWAL \$ 200.00 \*\*

\*ALL DUES ARE ANNUAL AND PAYABLE JANUARY 1 OF EACH YEAR \*

Make check payable to the Law Enforcement Training Directors Association of New York State, (LETDANYS) and mail along with your completed application to:

**Sgt. Philip D. Mospan  
Cornell University Police  
G-2 Barton Hall**

**Ithaca, NY 14853 - 1701**

**(607 - 255 - 8952**

**pdm3@cornell.edu**

**fax : 607 - 255 - 5916)**

- **New applicants must complete the new applicant section on the back of this form.**
- **Active membership:** Shall be open to those employed at a Law Enforcement Training Facility or agency within New York State who are full or part time training directors and/or their designated assistant. Also included is the Director of the Bureau for Municipal Police and his/her designated assistant.
- **Training Directors:** are those individuals who are responsible for providing police training programs.
- **Part Time Training Directors** are those individuals who hold full time positions other than training, but are assigned as training directors during specific training periods.
- **Designated Assistants** are those individuals who are the designated assistant of each training director. (limit: one assistant per director).
- **Associate membership:** Shall include those individuals who contribute to police training.
- **Corporate membership:** Shall include all businesses whose product is related to law enforcement training, and whose mission is to increase law enforcement professionalism.

**All applicants must be approved by the Executive Board and confirmed by a majority vote of Active members present at a regular Association business meeting.**

**New Applicant Section:**

1. Recommended for membership by:(**must be an active LETDANYS member**)

Name : \_\_\_\_\_ Title \_\_\_\_\_

Agency \_\_\_\_\_ Phone : \_\_\_\_\_

2. Are you a M.P.T.C. certified instructor ? \_\_\_\_\_ yes \_\_\_\_\_ no

If no, provide a detailed explanation of your area of expertise, including any college degree or certification.

\_\_\_\_\_

\_\_\_\_\_

3. What is your present full time position ?

\_\_\_\_\_

4. What is your connection with police training ?

\_\_\_\_\_

\*\*\*\*\*

**Executive Board use only:**

**Membership Accepted as:** \_\_\_\_\_ **Active** \_\_\_\_\_ **Associate**

**Membership Rejected: (reason)** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Membership Chairperson:** \_\_\_\_\_