

**PROGRAM OF STUDIES  
FOR LAW ENFORCEMENT  
OCCUPATIONAL CERTIFICATE OF COMPLETION**  
(Submit to Graduation Office after all signatures obtained)

**Student Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

**Name of Program: Law Enforcement**

**Completion Date:** \_\_\_\_\_

**REQUIREMENTS:**

**Core Requirements:**

Course #	Title	Credits	Term	Completed	Grade
LE F110	Cultural and Behavioral Strategies for Law Enforcement Officers	1			
LE F115	Enforcement Skills for Law Enforcement Officers	3			
LE F120	Law Enforcement Operations	4			
LE F125	Basic Police Procedures	4			
LE F205	Criminal Law for Police	4			

**Additional Requirements:**

**Total Credits Required 16**

**Total Training Hours 530**

I certify that the above named student has successfully completed all of the requirements for this Occupational Certificate of Completion and request that it be posted to his/her transcript for \_\_\_\_\_ semester \_\_\_\_\_ year.

Program Head: \_\_\_\_\_ Signature \_\_\_\_\_ Date: \_\_\_\_\_  
(printed name)

Campus Director: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(printed name)

Dean: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Printed name)

For Enrollment Services Only:  
Process date \_\_\_\_\_ Processed by \_\_\_\_\_