



CMM Supplemental Application

Municipal Law Enforcement



A. Municipal Law Enforcement Professional

Completed Documented*

Office Use

- ALL {
1. Municipal Law Enforcement Officer Certified (MLEO (c))
 2. **MLEOA** Courses/Annual Training seminars/workshops or professionally related workshops/conferences (minimum 20 hours)
 3. **Employment Experience** 4 years, (7,280 hours) Enforcement experience

Note: Re-certification Requirement: (every 3 years)
 A minimum of 12 hours work related training, at least 6 through **MLEOA**

Title: _____ Employer: _____ Start: _____ to _____
 Title: _____ Employer: _____ Start: _____ to _____ **
month/year

*Documented: include copies of certificates/diplomas, agendas/transcripts where possible with CMM Application ** Provide detail if additional positions

B. Municipal Law Enforcement Executive (above requirements and CMM II)

Completed Documented*

- ALL {
1. 4 x Community College/University equivalent courses (at least one in Law Enforcement, Local Gov't or Mgt and one job related) (Minimum 120 hours)
 2. **MLEOA** or professionally related courses/conferences/workshops (minimum 40 hours)
 3. **Employment Experience** 7 years (12,740 hours) Enforcement Experience (with 2 years, Full-Time in a Supervisory, Mgt or Senior Municipal Law Enforcement Position)

Note: Re-certification Requirement (every 3 years)
 ALL {
 A. A minimum of 30 hours work related training, at least 15 through **MLEOA**
 B. Participation in the development, implementation or review of municipal or **MLEOA** policies and by-laws
 C. Prepared and presented a report, policy or by-law to a municipal council, committee of council or the **MLEOA**

Title: _____ Employer: _____ Start: _____ to _____
 Title: _____ Employer: _____ Start: _____ to _____ **
month/year

*Documented: include copies of certificates/diplomas, agendas/transcripts where possible with CMM Application ** Provide detail if additional positions



**New applicants must attach their CMM Application
 Complete all sections for accurate evaluation**



- C.
1. Applicant: _____ Employer: _____
 2. Phone: _____ E-mail: _____
 3. **Signature:** _____ **Date:** _____
 4. **MLEOA Member** Yes No ****MLEOA Membership Required to Apply****
 5. **Witness:**
 - a) Municipal Official (**MLEOA** Member): _____
 - b) Signature: _____ Title: _____

* Witness identity only – not verification of content

MLEOA Enhancement Fee \$293

After application processing, invoices will be sent by email.

Payment may be made by cheque, EFT or online through the link provided on the invoice.

Email to info@ommi.on.ca OR submit by mail to: Suite 267, 6-470 King Street West, Oshawa ON L1J 2K9