

**CENTRAL CAROLINA COMMUNITY COLLEGE  
BASIC LAW ENFORCEMENT TRAINING ACADEMY APPLICATION**

Mail to: 1105 Kelly Drive, Sanford, NC 27330  
Physical Address: 3000 Airport Road, Sanford, NC 27330  
Tracy Kelly, Director (919) 777-7774

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<i>Last Name</i>	<i>First Name</i>	<i>Middle</i>
<hr/>		
<i>Street Address, City, State, Zip Code</i>		
<hr/>		
<i>Home Telephone</i>	<i>Cell Phone</i>	<i>E-mail Address</i>
<hr/>		
<i>Social Security #</i>	<i>Date of Birth</i>	<i>Driver's License # and State of Issuance</i>
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<i>Emergency Contact - Name:</i>	<i>Phone:</i>	<i>Relation:</i>

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Check which class this application is for:

- |  |   |
|--|---|
| <input type="checkbox"/> Day Class - Sanford (Fall____or Spring____) | <input type="checkbox"/> Night Class - Pittsboro (Spring Only)  |
| <input type="checkbox"/> Night Class - Sanford (Fall Only)           | <input type="checkbox"/> Night Class - Lillington (Spring Only) |

**ALL FORMS MUST BE TURNED IN PRIOR TO ADMISSION**

- \_\_\_\_\_ CCCC Application on line [www.cccc.edu](http://www.cccc.edu)
  - \_\_\_\_\_ BLET Application (this form)
  - \_\_\_\_\_ Copy of North Carolina Driver's License
  - \_\_\_\_\_ Copy of Social Security Card
  - \_\_\_\_\_ Copy of Birth Certificate
  - \_\_\_\_\_ Copy of High School Diploma/or GED Transcript
  - \_\_\_\_\_ **Sealed** High School Transcript/or GED Transcript to CCCC Registrar
  - \_\_\_\_\_ Driving Record(s) from **every State** of residence (online [www.ncdot.org/DMV](http://www.ncdot.org/DMV))
  - \_\_\_\_\_ **Certified** Criminal Histories: ***From every county or state of residence since the age of 18\****
- \*This includes college and military housing \*Online background checks are not acceptable
- \_\_\_\_\_ Military Records Include DD-214 or Current Military Status, if applicable
  - \_\_\_\_\_ F-1 Medical History Statement: *Signed and Stamped by N.C. Physician*
  - \_\_\_\_\_ F-2 Medical Examination Report: *Signed and Stamped by N.C. Physician*
  - \_\_\_\_\_ F-3 Personal History Statement: **Must be notarized**
  - \_\_\_\_\_ Authorization Release Form with printed name and signature
  - \_\_\_\_\_ Sponsorship Letter on N.C. Law Enforcement Agency's Letterhead with course date and location
  - \_\_\_\_\_ BLET Sponsorship Form signed and dated by sponsoring agency/applicant
  - \_\_\_\_\_ Copy of Reading Exam Score

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All forms must be *accurate and complete* (to include specific addresses) and will become a part of your permanent record in the BLET program. All forms must be turned into the BLET School Director either via mail or in person.