

<b>Form Q-1</b>	<b>Kentucky Law Enforcement Council</b> <i>MEDICAL EXAMINATION APPROVAL</i>	Office Use Only
<b>MAIL:</b> Kentucky Law Enforcement Council Funderburk Building 521 Lancaster Ave Richmond, KY 40475  <b>Phone:</b> 859-622-6218 <b>Fax:</b> 859-622-5943		<b>INSTRUCTIONS:</b> This form must be completed if your agency chooses to utilize a different medical examination, for selection and hiring of peace officers, from the KLEC. This examination meets or exceeds the minimum standards as set forth by the KLEC.

\_\_\_\_\_, through the undersigned agency head, is hereby requesting approval from the Kentucky Law Enforcement Council (KLEC) of our medical examination utilized for purposes of selection and hiring of peace officers. I believe this examination meets or exceeds the minimum standards as set forth by the KLEC.

Attach a copy of the administrative guidelines, including standards and procedures which this agency will use for conducting this test.

- I understand that this agency is not required to conduct its own tests and that KLEC testing may still be utilized.
- I understand that testing procedures and all test records are subject to review and audit by the KLEC and its agents.
- I further understand that this form must be resubmitted if the agency changes the Procedures, guidelines or standards contained herein.

Signed this _____ day of _____, 20_____.	
_____ Signature of Agency Hiring Authority or Designee	_____ Printed Name of Agency
_____ Printed Name of Agency Hiring Authority or Designee	_____ Agency Phone Number