



Law Enforcement Training Board

5402 S County Road 700 E
Plainfield, Indiana 46168

Phone 317/839-5191
Fax 317/839-9741

www.in.gov/ilea

Request for Defensive Tactics Instructor (5 day) Class –

a W-9 must be sent in with this request

Date of Request _____

Host Agency: _____

Address: _____

City and Zip Code _____

1st Choice Class to be held _____ THRU _____

2nd Choice Class to be held _____ THRU _____

3rd Choice Class to be held _____ THRU _____

Agency Contact Name _____

Agency Contact Email _____

Agency Contract Signatory _____

Agency Contract Signatory Email _____

For ILEA Use Only: Dates (Choice #) approved _____

ILEA Officer in Charge _____

INDIANA
LAW
ENFORCEMENT
ACADEMY