



**The University of Kansas**  
**KANSAS LAW ENFORCEMENT TRAINING CENTER**

**Authorization for Overnight Absence(s) Away From KLETC Campus**

**Student and Agency Information**

**Box 1**

Student Printed Name \_\_\_\_\_  
Basic Training Class # \_\_\_\_\_ Date form is being completed \_\_\_\_\_  
Agency \_\_\_\_\_ Agency Telephone Number \_\_\_\_\_  
Student's Cell Telephone Number for Emergency Contact \_\_\_\_\_

**Authorization for Overnight Absence(s) Away From KLETC Campus**

**Box 2**

- The KLETC Assistant Director or his designee may approve a student officer's overnight absence(s) away from the KLETC campus. Only those student officers authorized by their agency administrators or designees and whose agency officially communicates that authorization to KLETC by submission of this form are permitted to stay overnight away from KLETC campus.
- As agency administrator or as the agency administrator's designee, I authorize the above captioned student officer an overnight absence(s) away from the KLETC campus on the date(s) specified below.

**Single Overnight Absence**

**Box 3**

Date of Overnight Absence \_\_\_\_\_ Day of Week \_\_\_\_\_  
Location of Overnight Absence \_\_\_\_\_  
Specify Detailed Reason for Absence \_\_\_\_\_

**Multiple Overnight Absence(s)**

**Box 4**

Overnight Absence(s) \_\_\_\_\_ thru \_\_\_\_\_ Days of Week \_\_\_\_\_ thru \_\_\_\_\_  
Location of Overnight Absence \_\_\_\_\_  
Specify Detailed Reason for Absence \_\_\_\_\_

**Administrator and Student Signatures Required**

**Box 5**

By signing below we acknowledge and fully understand that in those instances where a student officer has authorization from an agency head or designee for an overnight absence(s) away from the KLETC campus, the KLETC student code of conduct and the alcohol prohibition rule remain in effect and are applicable to a student officer's overnight absence(s). Moreover, the KLETC alcohol prohibition rule applies during the **entire basic training course week** regardless of whether the student officer is physically present on the KLETC campus, elsewhere during off-duty hours or elsewhere during an authorized overnight absence(s) away from the KLETC campus.

Agency Administrator's Printed Name \_\_\_\_\_ Date \_\_\_\_\_  
Administrator's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Student Officer's Printed Name \_\_\_\_\_ Date \_\_\_\_\_  
Student Officer's Signature \_\_\_\_\_ Date \_\_\_\_\_