

AACPA TRAINING SURVEY

The Board of Directors has established a training committee, whose goal is to provide effective, useful training for the membership of AACPA. We hope to provide quarterly training on prevention topics, which our members can take back and implement in their communities, TCLEOSE credit will apply where appropriate.

In order to select the most appropriate training topics, we need your INPUT on your most important training needs. Please help us reach this goal by indicating what training you would like to see us provide.

Please complete the short survey below and mail to: **AACPA**
P.O. BOX 34033
SAN ANTONIO TX 78265-4033

Name: _____
Address: _____
City: _____ Zip+4 _____ - _____
Email: _____

Check one box: Civilian Military Law Enforcement: Federal
 Law Enforcement: County Law Enforcement: Municipal

(1) Please check the following topics you would like presented:

- Crime Watch and Homeland Security: The New Mission
- Auto Theft Prevention / Texas Heat Program
- Working with the Media: A Two-way Street
- Security and Video: The Digital Revolution
- 20 Hour Crime Prevention Inspector Course
- Crime Prevention & The Senior Community
- Stranger / Danger: Old Name / New Approach
- Cellular on Patrol
- Frauds & Scams: Bunco Alert
- Workplace Safety & Violence Prevention
- Minor Sting Operations: The How - to - Approach
- Computer Forensics
- Alarm Systems
- Electronic Access Control
- CCTV Systems
- Outdoor / Perimeter Protection
- Grant Writing
- Other: _____

(2) How far would you be willing to travel for training:

10 miles or less, 10 to 25 miles, 25 to 45 miles, more than 45 miles?

(3) How much money would you be willing to pay for training?

\$50, \$50 to \$75, \$75 to \$100, \$100 or more

(4) Would you attend training if it were TCLEOSE certified? Yes, No?

(5) Preference for training courses:

2 to 4 hours, 4 to 6 hours, 8 hours (*2 - four hour blocks*)
 16 hours, 24 hours

(6) Our LE Agency / Company would be willing to sponsor a training course? Yes, No

(7) I recommend the following person or company to be contacted as a presenter for the topic of:

Name: _____
Address: _____
City: _____ ST _____ Zip _____
Topic: _____