

CANADIAN POLICE AND PEACE OFFICERS NATIONAL MEMORIAL APPLICATION

Please provide the following required information and submit with a recent photograph of the officer.

Police officers, send to: CACP 300 Terry Fox Drive, Suite 100, Kanata, Ontario K2K 0E3

Peace officers, send to: Canadian Peace Officer's Memorial Association at P.O. Box 56071, 407 Laurier Ave. W, Ottawa, Ontario K1R 7Z1.

All applications must be signed by the Chief of Police or Director of the Organization.

Deadline for submissions: September 1; August 1 for Historical Names. Files received after these dates will be honoured the following year.

1. Full Name:				
2. Name to be recorded on Memorial:				
3a. Date of Birth:				
Day Month	Year	Day	Month	Year
4. Rank:				
5a. Date Appointed:	Year	b. Years of Official Service	:	
6. Next(s) of Kin: Name:		Name:		
Address:				
Relationship:				
Telephone:		Telephone:		
Email:		Email:		
7. Police or Correctional Service on date of de	ath:			
8a. Submitting Service:				
b. Address:				
c. Name of Contact Person (include teleph				
Full details of incident causing death:				
10. Photograph: Attached To Follow				
Name of Chief or Director (please print)				
Signature of Chief or Director		Date		





