



The Robbie Gail Charette Police Canine
Support Foundation Application



Date: _____

1. Agency: _____
Address: _____
Contact number: _____

2. Police Executive: _____
Email: _____
Contact number: _____

3. Name and title of the individual completing application: _____
Email: _____
Contact number: _____

4. Demographics of the police department: _____

5. Name of the selected handler (please include all relevant police and canine experience):

6. Reasons for needing financial assistance: _____

7. Summary of the planned use of the canine: _____

8. Any other relevant information: _____



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9. Please attached photographs or description of potential canine vehicles:

10. Attach a "Letter of Commitment" from the agency's Chief Executive.

Law Enforcement Chief Executive Signature