



**Arizona Police Canine Memorial**  
Arizona State Capitol - Wesley Bolin Plaza



**SUBMISSION FORM**

Request to have the Arizona Law Enforcement Canine Association Executive Board review the name of a canine that may be eligible for placement on the Arizona Police Canine Memorial.

**INFORMATION**

Canine's Name \_\_\_\_\_

Canine Handler at time of death \_\_\_\_\_ ID # \_\_\_\_\_

Department \_\_\_\_\_

End of Watch (EOW ) Date \_\_\_\_\_

Were the officer and canine on duty at the time of the incident?  Yes  No

Is this a qualifying off-duty death (refer to inclusion criteria)?  Yes  No

Is the canine's handler a full-time law enforcement or corrections officer?  Yes  No

Does the Department recognize this loss as a line-of-duty death?  Yes  No

Canine's total number of years of service in law enforcement \_\_\_\_\_

**Cause of Death**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name of the person or group making this request**

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_ e-mail \_\_\_\_\_

Date of Request \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Reviewed \_\_\_\_/\_\_\_\_/\_\_\_\_

**Attach information documenting the circumstances of the canine death to this page and send request to:**

**Arizona Law Enforcement Canine Association (ALECA)**  
3370 North Hayden Road #123-411  
Scottsdale, Arizona 85251