

PEACE OFFICER TRAINING CERTIFICATION & FINGERPRINT WAIVER

Pursuant Administrative Rule 35.257 and by authority of the Private Security Board, this certification may waive the training requirements for a Commissioned Security Officer and/or Personal Protection Officer.

Part I. To be completed by Active Peace Officer Only (Please Print)

Peace Officer Name: _____ Date of Birth: _____ Sex: _____

Social Security Number: _____ TCLEOSE PID No: _____

Employing Law Enforcement Agency: _____

- I am registered or have applied for a Commissioned Security Officer and/ or Personal Protection Officer registration with Company Name _____ and Company License Number _____.
- I am qualified for weapon type: _____ select one of the following: (SA, NSA, STG, SA/STG or NSA/STG).
- I certify that I am a Full-Time Peace Officer certified by the Texas Commission on Law Enforcement Officer Standards and Education (TCLEOSE).
- I am employed at least 32 hours per week by a Texas Law Enforcement Agency.
- I have reviewed and that I am familiar with Chapter 1702 Occupations Code and the related administrative rules.

Part II. To be completed by Retired Peace Officer Only (Please Print) (Note: Retired Peace Officer must be "Honorably Retired" and within (2) years from the retired date. Also, the following documents must be submitted as proof of retirement: 1. From the Employing Agency or 2. Texas Commission on Law Enforcement Officer Standards and Education (TCLEOSE).

Peace Officer Name: _____ Date of Birth: _____ Sex: _____

Social Security Number: _____ TCLEOSE PID No: _____

Date of Retirement: _____

- I am registered or have applied for a Commissioned Security Officer and/ or Personal Protection Officer registration with Company Name _____ and Company License Number _____.
- I am qualified for weapon type: _____ select one of the following: (SA, NSA, STG, SA/STG or NSA/STG).
- I certify that I am an Honorably Retired Peace Officer certified by the Texas Commission on Law Enforcement Officer Standards and Education (TCLEOSE).
- I have reviewed and that I am familiar with Chapter 1702 Occupations Code and the related administrative rules.

- I attest that my fingerprints are on file with my employing Law Enforcement Agency, located at _____, phone number (_____)_____.

By signing below, I hereby certify the truth of the above statements and those reflected on the Application Form PSB-38A or PSB-38B. My signature below may substitute for the signature on the Application Form.

_____ (signature) _____ (date)

THIS IS A GOVERNMENTAL RECORD; ANY FALSE ENTRY OR MISREPRESENTATION MAY RESULT IN CRIMINAL PROSECUTION AND/OR DISCIPLINARY ACTION.