

# East Texas Police Academy BPOC / NBPOC Admission Checklist NON-EMPLOYED CADET



Student Name: \_\_\_\_\_ PID: \_\_\_\_\_

Location: \_\_\_\_\_ Date of Academy: \_\_\_\_\_

**Sponsorship Form Completed and Notarized** --- Agency: \_\_\_\_\_

**FAST Fingerprints with Return**

**ETPA Applicant Declaration Page**

**L-2 Medical Filled Out as Required**

Valid Texas Medical/Nursing License

**L-2 Notice of Duties signed by Examiner**

**L-2 Drug Screen Filled Out as Required**

Drug Screen Conducted by DOT Approved Laboratory Testing Service (Must provide proof of DOT Approval)

Valid Texas Medical/Nursing License

**L-3 Psychological**

Valid Texas License to Practice

**L-3 Notice of Duties signed by Examiner**

**Birth Certificate or Proof of Citizenship if Naturalized Citizen**

Copies made by ETPA Staff from original

Copies made by agency from original

Other Certified Copy

**TxDPS Driving Record** (Note: DL does not show proof of valid license)

**High School Graduate or GED**

Copies made by ETPA Staff from original

Copies made by agency from original

Other Certified Copy

**DD214 Military Records**

**TCOLE C-1 Form Completed**

**Bacterial Meningitis Vaccine** (Under the age of 22)

**Personal History Statement**

Entire document completed

Notarized

FOR ACADEMY USE ONLY	INITIAL/DATE
PACKET RECEIVED BY:	
PHS VERIFIED BY:	
ARREST DISPOSITION APPROVED BY:	
DD-214 APPROVED BY:	
A-5 SEARCH COMPLETED BY:	



## **Important Application Information**

### **Personal Documents:**

For all supporting documentation (High School Diploma/GED, Birth Certificate, DD-214, Passport, etc.), **you must bring in your original documents. ETPA cannot accept a photocopy.** We will make a copy from your original documents and return the originals to you.

### **Fingerprints:**

If you will be attending ETPA with a non-employed sponsorship, please call our office no earlier than 7 business days after submitting your fingerprints through the FAST system to make sure that we have received your fingerprint return. In certain situations, your fingerprints will not be cleared unless you provide documentation to TCOLE. The only way you will know this is by calling our office and speaking to:

Jaime Delgado: 903-983-8672

Joe Cassin: 903-988-7599

### **Arrest Dispositions:**

If you have **ever** been arrested for **any** offense, regardless of whether or not you were convicted, acquitted, or received deferred adjudication, you must provide ETPA with a copy of your disposition paperwork.

### **Military Records:**

If you ever served in the military, in any capacity or for any period of time, you must provide ETPA with a copy of your DD-214, "**member-4**" copy. We can only accept the member-4 copy of a DD-214.

### **L-2 and L-3 Screenings:**

If you will be attending ETPA with a non-employed sponsorship, you must have your L-2 (Medical and Drug Screen) and L-3 (Psychological) completed by an ETPA approved

provider. **We will not accept L-2 and L-3 forms for non-employed sponsorships that were conducted by any other provider.** A list of approved providers is available on our website.

Before you leave the provider's office, double-check the forms to make sure that they have been signed and dated, and that all of the boxes have been filled out completely and correctly. **We cannot accept incomplete or incorrectly filled out forms.**

### **Accuracy and Completeness:**

Please make sure that all of your paperwork and forms are filled out completely, correctly, and there is no missing information. It is your responsibility to make sure that your paperwork is all filled out completely and correctly.

If you have any questions about any of the application paperwork, please call our office or email us at:

Jaime Delgado, Custodian of Records: 903-983-8672, [jdelgado@kilgore.edu](mailto:jdelgado@kilgore.edu)  
Joe Cassin, Director: 903-988-7599, [jcassin@kilgore.edu](mailto:jcassin@kilgore.edu)



# BASIC PEACE OFFICER SPONSORSHIP

## East Texas Police Academy



Date: \_\_\_\_\_  
Sponsoring Agency: \_\_\_\_\_  
Agency Administrator: \_\_\_\_\_  
Agency Phone Number: \_\_\_\_\_

Applicant Name (L, F, MI): \_\_\_\_\_  
Applicant SSN: \_\_\_\_\_  
Applicant PID: \_\_\_\_\_  
Applicant Phone Number: \_\_\_\_\_

BPOC Location: \_\_\_\_\_ Day / Night  
BPOC Course Dates: \_\_\_\_\_

=====

I certify that the applicant listed on this sponsorship form is:

[ ] **Non-Employed:** Sponsorship exists when the agency assumes no obligation to employ or commission the student as a peace officer. This sponsorship qualifies for **no** COG funding of tuition.

\_\_\_\_\_  
Signature of Sponsoring Official Date

Sworn to me and subscribed before me, this the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Notary Public in and for the State of Texas Printed name of Notary Public

My commission expires: \_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Signature of Notary Public

Seal or Stamp

Honesty Professionalism Integrity

*Kilgore College is an Equal Opportunity / Affirmative Action Institution.  
If you are a person with a disability and need assistance, please call 903-983-8672.*

Applicant Name: \_\_\_\_\_

Yes No

- Is applicant a **United States citizen**? *If no, applicant is not eligible to enroll in a BPOC or to be licensed as peace officer in the State of Texas.*
- Is applicant's **physical examination and drug screen report** on file with agency (TCOLE form L-2)?
- Is applicant's **psychological exam report** on file with agency (TCOLE form L-3)?
- Is applicant at least **21 years of age**? If not, is the applicant at least **18 years of age** with either an **associate's degree or 60 college hours**? If not, is the applicant at least **18 years of age** and has served **two years of active-duty military service** and received an **honorable discharge**? *If no, applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*
- Has the applicant been fingerprinted and subjected to a search of local, state, and U.S. national records and fingerprint files to disclose any criminal records via the F.A.S.T. system? **ETPA must have a copy of a cleared F.A.S.T. report prior to enrollment.**
- Does the applicant have a **high school diploma**, a **G.E.D.**, or at least **two years of active duty military service**? *If no, applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*
- Has the applicant **ever** been convicted of a **felony** or **class "A" misdemeanor**, including probation, community service, or deferred probation? *If yes applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*
- Has the applicant been convicted of a **class "B" misdemeanor** within the past **10 years**, including probation, community service, or deferred probation? *If yes, applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*
- Has the applicant **ever** been convicted of a **family violence offense**, including class "C" misdemeanor family violence? *If yes, applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*
- Is the applicant prohibited by state or federal law from **possessing firearms or ammunition**? *If yes applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*
- Is the applicant prohibited by state or federal law from **operating a motor vehicle**? *If yes applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*
- Is the applicant **currently charged** with any criminal offense for which conviction would be a **bar to licensure**? *If yes, applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*
- Has the applicant ever received a **dishonorable or other discharge based on misconduct which bars future military service**? *If yes, applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*
- Has the applicant ever had a TCOLE license **denied by final order** or **revoked**? *If yes, applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*
- Is the applicant currently on **TCOLE suspension** / has a **surrender of license** currently in effect? *If yes, applicant is not eligible to enroll in a BPOC or to be licensed as a peace officer.*

I certify under penalty of perjury that the above-listed student meets all the requirements for enrollment in a Basic Peace Officer Course as outlined in TCOLE rules §217.1, *Minimum Standards for Enrollment and Initial Licensure*. I understand that the documents relating to these standards for this student are to be kept on file with the sponsoring agency and are available for inspection by East Texas Police Academy faculty or staff upon written notice. I am aware that this document constitutes a governmental record and knowingly making a false entry in, or false alteration of, a governmental record is a violation of §37.10 of the Texas Penal Code, *Tampering with Governmental Record*.

\_\_\_\_\_  
Signature of Sponsoring Official

\_\_\_\_\_  
Date

Sworn to me and subscribed before me, this the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Notary Public in and for the State of Texas

\_\_\_\_\_  
Printed name of Notary Public

My commission expires:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

Seal or Stamp

*Kilgore College is an Equal Opportunity / Affirmative Action Institution.  
If you are a person with a disability and need assistance, please call 903-983-8672.*

## TCOLE/Non-Law Enforcement Academies (ORI TCOLE/Non-Law Enforcement Academies/Service Code 11G4J8)

The general process for electronic fingerprinting is:

1. Schedule an appointment to be electronically fingerprinted by MorphoTrust USA at one of their Identogo enrollment centers.
  - Internet based scheduling is the quickest and most convenient way to obtain a fingerprint appointment.
    - a. **You may begin the process now by simply clicking on this link:**  
<https://uenroll.identogo.com/servicecode/11G4J8>
    - b. Academy Number: LE- 511256 .
    - c. Provide all required pre-enrollment data and select a convenient date and time for your appointment
  - If you prefer to schedule over the telephone, you must:
    - a. Have your Service Code ready (**11G4J8**), then call **888.467.2080**;
    - b. MorphoTrust will prompt you for the Service Code (**11G4J8**);
    - c. Provide all required pre-enrollment data and select a convenient date and time for your appointment
2. Arrive at your scheduled appointment with your photo identification and fee (\$39.75).
  - If you plan on bringing a form of identification other than a valid (unexpired) TX Driver License, please refer to the Department of Public Safety's acceptable document types here: <http://www.l1enrollment.com/state/forms/tx/55fc619a7f7aa.doc>
  - MorphoTrust accepts Visa/MasterCard/Discover/American Express, business checks, money orders and coupon codes (employer accounts) at the time of service.
  - Please note that personal checks and cash are **not accepted**.
3. Your fingerprints will be submitted electronically to DPS and the FBI. You will not receive a printed fingerprint card.
4. At the conclusion of your appointment, the MorphoTrust enrollment agent will provide you with an Identogo receipt stating that you were fingerprinted.
  - Do not throw away the receipt;
  - You may check status on your submission by clicking on this link:  
<https://uenroll.identogo.com/servicecode/11G4J8> and then;
  - Click "**Check Status**"

Fingerprints provided for this application shall be used to check criminal history records of the Texas Department of Public Safety and the Federal Bureau of Investigation, in accordance with applicable statutes.



# East Texas Police Academy Applicant Declaration Page



**WARNING: THE DECLARATIONS MADE ON THIS FORM ARE OFFICIAL STATEMENTS MADE ON A GOVERNMENTAL RECORD. KNOWINGLY MAKING A FALSE ENTRY OR OMISSION IS A CRIMINAL OFFENSE UNDER PENAL CODE §37.10.**

**Applicant Name:** \_\_\_\_\_ **Course Applying For:** \_\_\_\_\_

**A-5 Declaration:**

INITIAL

I certify that I have **not** ever been dismissed from any other licensing course (BPOC, BCCC, BTOC) offered by any academy in the State of Texas, and that an A-5 has never been reported to TCOLE for my failure to complete a licensing course for any reason.

I certify that I have been previously dismissed from another licensing course (BPOC, BCCC, BTOC) offered by any academy in the State of Texas, namely the following course (List: Course, Academy Name, Date):

**Military Service Declaration:**

INITIAL

I certify that I have **not** ever served in any branch of the armed forces of the United States of America, nor any of their reserve or guard components.

I certify that I have served in a branch of the armed forces of the United States of America, or in one of their reserve or guard components (List: Branch, Dates of Service):

**Prior Arrest Declaration:**

*For purposes of this question, an arrest is considered to have occurred if a person has been booked into any correctional facility or holding facility pursuant to any criminal charge of any grade, regardless of the duration of time spent in the facility or the final disposition of the charge alleged, or the person's age at the time the charge was filed; or if an information or an indictment was issued against a person alleging a criminal offense occurred. Note: court disposition paperwork is required for ALL arrests.*

INITIAL

I certify that I have **not** ever been arrested.

I certify that I have been arrested (List: State, Arresting Agency, Charge, Disposition):

**Prior ETPA Enrollment:**

INITIAL

I certify that I have **never** attended a licensing course offered by ETPA (BPOC, BCCC, BTOC) at any time in the past.

I certify that I have attended a licensing course offered by ETPA (BPOC, BCCC, BTOC) at any time in the past. (List: Course Type, Course Location, Date):

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers to the above questions. I fully understand that any misrepresentation, omission, or falsification may deem me permanently disqualified from enrollment and may result in criminal charges being filed against me.

**Print Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Before me personally appeared \_\_\_\_\_, who stated that he/she has full knowledge of the purposes of this document and that he/she executed this document of his/her own free will and accord.

SEAL or Stamp

\_\_\_\_\_  
Signature of Notary

My Commission Expires: \_\_\_\_\_

**TEXAS COMMISSION ON LAW ENFORCEMENT**  
**6330 E. Highway 290, STE. 200, Austin, Texas 78723-1035**  
**Phone: (512) 936-7700**  
<http://www.tcole.texas.gov>

**LICENSEE MEDICAL CONDITION DECLARATION (L-2) Commission Rule §217.1, 217.7**  
**INDIVIDUAL INFORMATION**

1. TCOLE PID	2. Last Name	3. First Name	4. M.I.	5. Suffix (Jr., etc.)
6. Home Mailing Address		7. City	8. State	9. Zip Code

**APPOINTMENT (Do not check if student is in an academy)**

10. <input type="checkbox"/> Initial Appointment, Never Licensed <input type="checkbox"/> License holder with more than a 180 day break in service	
11. <input type="checkbox"/> Peace Officer <input type="checkbox"/> Reserve Officer <input type="checkbox"/> County Jailer <input type="checkbox"/> Telecommunicator	

**DEPARTMENT / ACADEMY INFORMATION**

An agency hiring a person for whom a license is sought shall select the examining physician. The hiring agency shall maintain a copy of the report on file in a format readily accessible to the commission.

12. TCOLE Number	13. Appointing Agency or Academy
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**Attention Examining Professional:** The above information must be completed by the requesting agency prior to the examining professional completing and signing the L-2 form.

INITIAL APPOINTMENTS: Peace Officer (both exams), County Jailer (both exams), Telecommunicator (drug screen only).

MORE THAN 180 day break in service: Peace Officer, County Jailer, and Telecommunicator: Drug Screen ONLY.

I certify that I have completed my examination of the examinee, on this date and determine the examinee is found:	
<input type="checkbox"/> <b>MEDICAL EXAM</b> - To be physically sound and free from any defect which may adversely affect the performance of duty appropriate to the type of license sought.	
<input type="checkbox"/> Physician <input type="checkbox"/> Physician's Assistant <input type="checkbox"/> Nurse Practitioner (State License # not required)	

14. Name (type or print)	15. License No		
16. Street Address			
17. City	18. State	19. Zip Code	20. Phone Number

21. Date of Examination	22. Signature	23. Date
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I certify that I have completed my examination of the examinee, on this date and determine the examinee is found:	
<input type="checkbox"/> <b>DRUG SCREEN</b> - To show no trace of drug dependency or illegal drug use after a physical examination, blood test or other medical test.	
<input type="checkbox"/> Physician <input type="checkbox"/> Physician's Assistant <input type="checkbox"/> Nurse Practitioner (State License # not required) <input type="checkbox"/> DoT Provider	

24. Name (type or print)	25. License No		
26. Street Address			
27. City	28. State	29. Zip Code	30. Phone Number

31. Date of Examination	32. Signature	33. Date
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**THIS DECLARATION IS NOT PUBLIC INFORMATION PER TEXAS OCCUPATIONS CODE 1701.306. VALID FOR 180 DAYS FROM GRADUATION DATE OF ACADEMY, IF ACCEPTED BY APPOINTING AGENCY OR VALID FOR 180 DAYS FROM DATE SIGNED UNLESS WITHDRAWN OR INVALIDATED. MUST BE SIGNED BY A LICENSED PHYSICIAN, NURSE PRACTITIONER, or PHYSICIANS ASSISTANT WITH A VALID PHYSICIANS ID, or in the case of a DoT drug screen only, authorized DoT personnel.**





# East Texas Police Academy Notice of Duties for Medical Exam (L-2) Basic Peace Officer Course



Name of Applicant Being Examined: \_\_\_\_\_

This medical examination is being conducted pursuant to Texas Commission on Law Enforcement Rule §217.1(b)(11), which states that an applicant is:

“[E]xamined by a physician, selected by the appointing or employing agency, who is licensed by the Texas Medical Board. The physician must be familiar with the duties appropriate to the type of license sought and appointment to be made. The appointee must be declared by that professional, on a form prescribed by the commission, within 180 days before the date of appointment by the agency to be:

(A) physically sound and free from any defect which may adversely affect the performance of duty appropriate to the type of license sought;

(B) show no trace of drug dependency or illegal drug use after a blood test or other medical test; and

(C) for the purpose of meeting the requirements for initial licensure, an individual's satisfactory medical exam that is conducted as a requirement of a basic licensing course may remain valid for 180 days from the individual's date of graduation from that academy, if accepted by the appointing agency”

The duties of a peace officer typically include, but are not limited to:

Works on rotating shifts performing security patrols, traffic control, investigation, and first aid at accidents, detection, investigation, and arrest of persons involved in crimes or misconduct. This may include periods of high physical exertion, including chasing and fighting one or more subjects. Maintains normal availability by radio or telephone for consultation on major emergencies or precedent. Patrols streets, parks, commercial and residential areas to preserve the peace and enforce the law, control vehicular traffic; prevent, detect, and investigate misconduct involving misdemeanors, felonies, and other law violations and to otherwise serve and protect.

Responds to emergency radio calls and investigates accidents, robberies, civil disturbances, domestic disputes, fights, drunkenness, missing children, prowlers, abuse of drugs, etc. Takes appropriate law enforcement action. Interrogates suspects, witnesses, and drivers. Preserves evidence. Arrests violators. Investigates and renders assistance at scene of vehicular accidents. Summons ambulances and other law enforcement vehicles. Takes measurements and draws diagrams of scene. Conducts follow-up investigations of crimes committed during assigned shift. Seeks out and questions victims, witnesses, and suspects. Develops leads and tips. Searches scene of crimes for clues. Analyzes and evaluates evidence and arrests offenders. Prepares cases for giving testimony and testifies in court proceedings. Conducts patrol activities including directing traffic, investigation of reported or observed violations of law, and conducting patrol activities.

I certify that I have reviewed the TCOLE Rule regulating this exam, and that I have reviewed the duties of a peace officer:

Signature of Medical Professional Conducting Exam: \_\_\_\_\_

Printed Name of Medical Professional Conducting Exam: \_\_\_\_\_

**TEXAS COMMISSION ON LAW ENFORCEMENT**

6330 E. Highway 290, STE 200, Austin, Texas 78723-1035

Phone: (512) 936-7700

<http://www.tcole.texas.gov>

**LICENSEE PSYCHOLOGICAL AND EMOTIONAL HEALTH DECLARATION (L-3)**  
**Commission Rule 217.01, 217.1, 217.7, 221.35**

**INDIVIDUAL INFORMATION**

1. TCOLE PID	2. Last Name	3. First Name	4. M.I.	5. Suffix (Jr., etc.)
6. Home Mailing Address		7. City	8. State	9. Zip Code

Is this exam for a student enrolling in an academy?  Yes  No.

If yes, check one  Peace Officer  County Corrections  Telecommunicators  School Marshal

**Attention Requesting Agency:** State Law and Commission Rule require that this psychological examination be performed by a **licensed psychologist** or a **psychiatrist** except in an exceptional circumstance when, upon prior approval by the Commission, it may be performed by a qualified licensed physician. The Chief Administrator of the requesting agency must request prior approval in writing and must receive specific written approval before an examination under exceptional circumstances is acceptable.

**APPOINTMENT (Do not check if student)**

10. <input type="checkbox"/> Peace Officer <input type="checkbox"/> Reserve Officer <input type="checkbox"/> County Jailer <input type="checkbox"/> Telecommunicator <input type="checkbox"/> School Marshal
<input type="checkbox"/> Juvenile Probation Officer <input type="checkbox"/> Public Security Off.

**ACADEMY / DEPARTMENT INFORMATION**

11. TCOLE Number	12. Agency/Academy Name	13. Mailing Address		
14. City	15. County	16. Zip Code	17. Phone Number	

**Attention Examining Professional:** State Law and Commission Rule require that this psychological examination be performed by a **licensed psychologist** or a **psychiatrist** except in an exceptional circumstance when, upon prior approval by the Commission, it may be performed by a qualified licensed physician. The agency must request prior approval in writing and must receive specific written approval before an examination under exceptional circumstances is acceptable.

**STATEMENT OF EXAMINER: (Please check the appropriate box and provide the requested information)**

I am a  **Licensed Psychologist**,  **Psychiatrist**, and I certify that I have completed a psychological examination of the above named individual pursuant to professionally recognized standards and methods. I have concluded that, on this date, the individual IS in satisfactory psychological and emotional health to perform the duties, accept the responsibilities and meet the qualifications established by the appointing agency.

Examiner: \_\_\_\_\_  
Name (type or print) State License Number

Mailing Address: \_\_\_\_\_  
Street City State Zip

Phone Number: \_\_\_\_\_ Date of Examination(s) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

THIS DECLARATION IS NOT PUBLIC INFORMATION AND IS VALID UNLESS WITHDRAWN OR INVALIDATED, AND IS VALID ONLY IF SIGNED BY A LICENSED PSYCHOLOGIST OR PHYSICIAN.



## East Texas Police Academy Notice of Duties for Psychological Exam (L-3) Basic Peace Officer Course



Name of Applicant Being Examined: \_\_\_\_\_

This medical examination is being conducted pursuant to Texas Commission on Law Enforcement Rule §217.1(b)(12), which states that an applicant is:

“[E]xamined by a psychologist, selected by the appointing, employing agency, or the academy, who is licensed by the Texas State Board of Examiners of Psychologists. This examination may also be conducted by a psychiatrist licensed by the Texas Medical Board. The psychologist or psychiatrist must be familiar with the duties appropriate to the type of license sought. The individual must be declared by that professional, on a form prescribed by the commission, to be in satisfactory psychological and emotional health to serve as the type of officer for which the license is sought. The examination must be conducted pursuant to professionally recognized standards and methods. The examination process must consist of a review of a job description for the position sought; review of any personal history statements; review of any background documents; at least two instruments, one which measures personality traits and one which measures psychopathology; and a face to face interview conducted after the instruments have been scored. The appointee must be declared by that professional, on a form prescribed by the commission, within 180 days before the date of the appointment by the agency;

(A) the commission may allow for exceptional circumstances where a licensed physician performs the evaluation of psychological and emotional health. This requires the appointing agency to request in writing and receive approval from the commission, prior to the evaluation being completed; or

(B) the examination may be conducted by qualified persons identified by Texas Occupations Code § 501.004. This requires the appointing agency to request in writing and receive approval from the commission, prior to the evaluation being completed; and

(C) for the purpose of meeting the requirements for initial licensure, an individual's satisfactory psychological exam that is conducted as a requirement of a basic licensing course may remain valid for 180 days from the individual's date of graduation from that academy, if accepted by the appointing agency”

The duties of a peace officer typically include, but are not limited to:

Works on rotating shifts performing security patrols, traffic control, investigation, and first aid at accidents, detection, investigation, and arrest of persons involved in crimes or misconduct. This may include periods of high physical exertion, including chasing and fighting one or more subjects. Maintains normal availability by radio or telephone for consultation on major emergencies or precedent. Patrols streets, parks, commercial and residential areas to preserve the peace and enforce the law, control vehicular traffic; prevent, detect, and investigate misconduct involving misdemeanors, felonies, and other law violations and to otherwise serve and protect.

Responds to emergency radio calls and investigates accidents, robberies, civil disturbances, domestic disputes, fights, drunkenness, missing children, prowlers, abuse of drugs, etc. Takes appropriate law enforcement action. Interrogates suspects, witnesses, and drivers. Preserves evidence. Arrests violators. Investigates and renders assistance at scene of vehicular accidents. Summons ambulances and other law enforcement vehicles. Takes measurements and draws diagrams of scene. Conducts follow-up investigations of crimes committed during assigned shift. Seeks out and questions victims, witnesses, and suspects. Develops leads and tips. Searches scene of crimes for clues. Analyzes and evaluates evidence and arrests offenders. Prepares cases for giving testimony and testifies in court proceedings. Conducts patrol activities including directing traffic, investigation of reported or observed violations of law, and conducting patrol activities.

I certify that I have reviewed the TCOLE Rule regulating this exam, and that I have reviewed the duties of a peace officer:

Signature of Licensed Professional Conducting Exam: \_\_\_\_\_

Printed Name Licensed Professional Conducting Exam: \_\_\_\_\_

**PID ASSIGNMENT (C-1)**  
**Completion of all fields required.**

**INDIVIDUAL INFORMATION**

1. Social Security Number	2. First Name	3. M.I.	4. Last Name	5. Suffix (Jr., etc.)
6. Race / Ethnicity <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Multicultural <input type="checkbox"/> White			7. Date of Birth /    /	8. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
10. Home Mailing Address		11. City		9. Driver's License State: Num.:
12. State		13. Zip Code		
14. Height	15. Weight	16. Hair Color	17. Eye Color	
18. U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	19. Phone Number (include area code)		20. Email	

This form is to be submitted only for the express purpose of having a personal identification number (PID) assigned by TCOLE to the above named individual therein creating a TCOLE record and allowing training to be reported for that individual.

**Agency administrator or training coordinator check appropriate box for their student or employee.**

- Applying for entry into a basic licensing course.
- Applicant has read and received a copy of §217.1 Minimum Standards for Initial Licensure.

\_\_\_\_\_  
 Signature of Applicant Date

- Future appointment as a Telecommunicator, Temporary or Licensed
- Future appointment as a County or Contract Jailer, Temporary or Licensed
- Future Appointment as a Probation Officer, Juvenile or Adult
- Ability to track training hours

TCOLE agency / training provider number \_\_\_\_\_ and Name \_\_\_\_\_

\_\_\_\_\_  
 Agency Administrator or Training Coordinator (Type or Print) Signature Date

**Individuals not associated with a training provider or agency check below.**

- Applying for instructors certificate
- Applying for Retired Federal Firearms ID
- Applying for consideration of prior out-of-state, federal, military, special forces or TDCJ training.

\_\_\_\_\_  
 Signature of Applicant Date