UTAH PEACE OFFICER STANDARDS AND TRAINING

Application For Certification

APPLICANT INFORMATION

Last Name | First Name | Middle Initial | POST ID

Home Address | City | State | Zip Code

Select Status: ☐ Officer Just Completed Training OR ☐ Officer Already Certified From Previous Employment (skip training information)

TRAINING INFORMATION

Training Academy | Date Completed

Certification Earned

AGENCY INFORMATION

Agency | Date of Hire

CERTIFICATION INFORMATION

I request this person be certified as: (check all that apply)

- ☐ Special Function Officer
- ☐ Law Enforcement Officer
- ☐ Correctional Officer
- ☐ Dispatcher
- ☐ Special Function Officer Reserve
- ☐ Law Enforcement Officer Reserve
- ☐ Correctional Officer Reserve

In the position of: _____ (specify position to be certified in)

I certify this person to be an employee of this agency who will be working in a position requiring the certification. A background investigation has been conducted by me or my representative. I am satisfied that this person is of good moral character. To the best of my knowledge this applicant is free of any physical, emotional or mental conditions which might aversely effect his/her performance in the certified position.

POST USE ONLY

Change of Status Received By | Date

Signature of Agency Head | Date

Title

Print Form