



Application For BASIC PEACE OFFICER CERTIFICATION

FORM

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Colorado Department of Law - POST
1300 Broadway 9th Floor
Denver, CO 80203
post@coag.gov
720-508-6721 FAX 866-858-7486

October 2020

POST RULE

PLEASE REFER TO POST RULE 10

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Last Name	First	Full Middle
Home Address	City	State Zip
Mailing Address (if different from above)	City	State Zip
Other Names	E-mail	
Cell Phone	Alternate Phone <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Other	
Colorado Driver's License Number	Gender	
SSN	Date of Birth	

- I am scheduled to successfully complete a POST approved basic training academy on _____ (date). **(Submit a copy of signed and dated academy certificate upon completion.)**
- I possess a high school diploma, equivalent, or evidence of HS completion, including official college transcript(s) or degree. **(Submit verification of completion.)**
- I possess current first aid and CPR certification or will complete prior to graduation. **(Submit copies showing front and back of each card). *TCCC is equivalent to First Aid***
- My fingerprints were submitted to the Colorado Bureau of Investigation **prior to enrollment**.
- I have I have **not** been convicted of any felony or any misdemeanor as referenced in 24-31-305(1.5) C.R.S.
- I have I have **not** entered into an adult pretrial diversion, deferred judgement/sentencing or deferred prosecution, pending or complete, for any above referenced offense(s) on or after July 1, 2001, even if the case was sealed or expunged.
- I have received a variance from POST if I answered in an affirmative manner to #5 or #6. **(If applicable submit a copy.)**
- I am **not** under investigation or pending an investigation for any felony or any misdemeanor, as referenced in § 24-31-305(1.5), C.R.S.
- I have I have **not** been certified as a peace officer in another state(s). State(s): _____ **(Submit a completed Form 3 and Release of Information if ever previously certified in another State).**
- I have I have **not** served in the U.S. Military and have not been released or discharged under dishonorable conditions. **(Submit a copy of official discharge documents showing Character of Service).**
- I am a United States citizen.
- I am **not** a United States citizen; however, I am legally permitted to work in the U.S. **(Submit verification).**
- I possess a valid Colorado driver's license or Colorado Identification card. **(Submit a clear copy).**

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE EXAMINED THIS AFFIDAVIT AND ACCOMPANYING DOCUMENTS, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THEY ARE TRUE, CORRECT, AND COMPLETE. I FURTHER ACKNOWLEDGE THAT ANY FALSE STATEMENT, MISSTATEMENT, OR INACCURACY MAY RESULT IN REVOCATION OF MY CERTIFICATION, AS WELL AS CRIMINAL PROSECUTION.

Applicant's Signature _____ State of _____ County of _____

Signed before me this _____ day of _____, _____

My Commission Expires: _____ - _____ - _____

NOTARY PUBLIC