New York State Division of Criminal Justice Services

WAIVER OF POLICE OFFICER TRAINING REQUIREMENT

(Executive Law §841)

THIS FORM IS USED BY PERSONS WHO HAVE RECEIVED PRIOR CERTIFICATION OF POLICE BASIC TRAINING, FROM THE NEW YORK STATE POLICE OR NEW YORK CITY POLICE DEPARTMENT OR WHILE FORMERLY EMPLOYED AS A PEACE OFFICER. FORMS PRESENTED FOR FILING MUST CONTAIN ORIGINAL SIGNATURES. ALTHOUGH THE BLANK FORM MAY BE DUPLICATED, PHOTOCOPIES OF COMPLETED FORMS, OR FORMS WITH PHOTOCOPIED SIGNATURES WILL NOT BE ACCEPTED.

Executive Law §841(3) authorizes the commissioner of the Division of Criminal Justice Services to certify police basic training, and to issue equivalency certificates to former State University of New York Public Safety Officers appointed prior to January 1, 1999, or to former peace officers who have completed a Basic Course for Police Officers approved by the Municipal Police Training Council for the purposes of satisfying the training requirements established by General Municipal Law (GML) §209-q. Certification is contingent upon demonstration of the completion of supervised field training, requisite job-related law enforcement experience as determined by the commissioner, and if deemed necessary, the successful completion of relevant police officer training courses pursuant to GML §209-q.

SECTION I: APPLICANT INFORMATION

This section must be completed by the chief executive officer of the applicant's current employer. Type or print legibly, the applicant's last name, first name, middle initial, date of birth, social security number, and gender. Enter the name of the current employer, the rank and/or title of the applicant, and the date of initial appointment. While the Social Security Number is not required, the accuracy of linking future training records with appointment information cannot be assured without it. Carefully read the certification. Sign and date in the area provided. With the exception of Social Security Number, the information in Section I is required. Incomplete submissions will not be processed.

S E C T I O N I I: PREVIOUS POLICE OR PEACE OFFICER EXPERIENCE

Type or print legibly, the agency name, telephone, complete mailing address, title or rank of the applicant, type of appointment (full or part-time), the date of appointment and the date of separation from service (if any). Repeat for each police employer. Incomplete submissions will not be processed.

The provisions of General Municipal Law §209-q regarding the validity of police officer basic training certification applies to newly appointed police officers, regardless of past employment. For example, a former NYPD or NYSP member who has been separated for more than four years and is then appointed as a police officer with a town police department must complete the Police Refresher Course within twelve months of appointment.

SECTION-III: POLICE BASIC TRAINING

Type or print legibly, the name, telephone, complete mailing address of the academy that provided the basic training course. Include the name of the course director and the dates of the course. Incomplete submissions will not be processed. A photocopy of the certificate of completion or official transcript must be attached.

* If previously employed by the NYPD, a copy of the letter of good standing or NYPD Exit Interview Form MUST be submitted. *

MAILING INSTRUCTIONS:

Mail completed forms to:

NYS Division of Criminal Justice Services Office of Public Safety – Records Unit Alfred E. Smith State Office Building 80 South Swan St., 3rd Floor Albany, NY 12210

QUESTIONS:

If you have any questions regarding this form, call (518) 485-1092 for assistance.

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		TION (To be completed by the					
Applicant Last Name		Applicant First Name	MI	Date of Birth	Social Security Numb	Gender M F	
New York Employer (applican	Rank or Titl	Rank or Title Date of Appointment					
I hereby certify the above named individual has been appointed as a sworn police officer with this agency. I have determined that he/she has completed the basic training course while employed as a police officer in the United States of Territories thereof. Accordingly, I request that the Division of Criminal Justice Services review and evaluate the enclosed documentation for satisfaction of all or part of the basic training requirements for police officers as established by General Municipal Law section 209-q. I understand that the information in Section I is part of a written statement that will be presented to the Division of Criminal Justice Services for filing, and I certify that it is true to the best of my knowledge and belief.							
Ü	Signature of Chief Executive Officer Date						
*Pursuant to the New York State Personal Privacy Protection Law, DCJS is authorized to collect personal identifying information as part of a public safety agency record. Personal identifying information on this form shall not be revealed, released, transferred, disseminated or otherwise communicated orally, in writing, or by electronic means other than to the registrant. Disclosure of personal identifying information is voluntary. Refusal to provide personal identifying information shall not result in the denial of any right, benefit, or privilege.							
SECTION II - PRE		FFICER EXPERIENCE					
Identify previous police emplo Name of Previous Law Enforce	<u> </u>				Talanhone		
Name of Previous Law Lines			Telephone				
Address	City, State,	ZIP					
<u></u>							
Rank or Position	Type of Appointment Full-time Part-time Date of appointment		ointment	Date of separation			
S E C T I O N I I I – POLICE BASIC AND IN-SERVICE TRAINING							
Identify prior police basic training. A copy of the curriculum identifying the topics and hours which composed the basic and in-service police training as well as any certificates of completion or official transcripts issued by the entity that conducted the training must be attached. Attach all training you wish to have considered.							
Name of Law Enforcement Agency or Academy that provided police basic training					Telephone		
Address	City, State,	City, State, ZIP					
Course Director Name			Course star	t date	Course end da	ate	
ACCEPTABLE DOCUMENTATION							
☐ A certificate of su	successful completion	from a police basic training cour	ırse.				
☐ An official transc							
☐ The course curri	or riculum including topics and / or	s and hours from a basic training	ıg course.				
☐ An official transc		accessful completion from the tra	aining provid	er of police in-serv	vice training courses.		
☐ The course curri	ícula including topics a	and hours from police in-service	e training co	urses.			
If previously employed by the NYPD, a copy of the letter of good standing or NYPD Exit Interview Form MUST be submitted.							
		DCJS USE	ONLY				
Training Verified By:	Approved By:	Date:	School	ID:			
Employer Code:	Pank Code:	Course Code:					