New York State Division of Criminal Justice Services

SECURITY GUARD PROGRAM – SECURITY GUARD TRAINING SCHOOL APPLICATION

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THIS FORM IS USED TO ESTABLISH OR RENEW A SECURITY GUARD TRAINING SCHOOL. FORMS PRESENTED FOR FILING MUST CONTAIN ORIGINAL SIGNATURES. THE BLANK FORM MAY BE DUPLICATED, HOWEVER FORMS WITH PHOTOCOPIED SIGNATURES WILL NOT BE ACCEPTED. TYPE ALL INFORMATION. OMMISSIONS OR LACK OF INFORMATION WILL STOP THE REVIEW PROCESS. NEW SCHOOL DIRECTOR(S) WILL BE REQUIRED TO ATTEND AN ORIENTATION SEMINAR IN ALBANY. *PLEASE DO NOT STAPLE APPLICATION OR SCHOOL CREATED FORMS.*

Security Guard Training Schools must be approved by the Division of Criminal Justice Services (DCJS), pursuant to Title 9 of the Official Compilation of Codes, Rules, and Regulations of New York State, Part 6028. **Security Guard Training Schools are approved to conduct either mandated non-firearms security guard training, mandated security guard firearms training, or both.**

The process for applying for a security guard training school consists of the three types of documentation listed below. Each section is discussed in detail in the following material.

I. School Application and Training Site Approval Form
II. Forms and Documentation- Renewing schools do not need to re-submit forms and documents if there have been no changes
III. School Prepared Forms

DCJS reserves the right to require further documentation as necessary to properly identify school owners and school directors, verify contact information and determine whether the school location meets DCJS standards for classroom instruction.

A non-refundable fee of $1,000 for new schools or $500 for renewals must be submitted with the Security Guard School Application. Payment must be in the form of a money order, bank certified check, or corporate check and made payable to the NYS Division of Criminal Justice Services (DCJS).

*****Fee is waived for government agencies, municipalities and public secondary or collegiate-level educational institutions in NY (SUNY and CUNY SCHOOLS).***

*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 applicant. 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.

The applicant will receive the school's approval, or a letter detailing the reason for denial of the application within 120 days of receipt of a complete application. A complete application must contain all information and supporting documentation as outlined below. All of the information requested must be submitted before the application can be approved.

TRAINING SCHOOL INFORMATION

APPLICATION TYPE: Check the appropriate box for new school or school renewal

TYPE OF TRAINING: Check the type of security guard training the school is applying for (Non-Firearms or Firearms). If applying to conduct both types of training, check both boxes.

TYPE OF SCHOOL: Check if school will be operated as an in-house only training or open to the general public. If the school will be both, the school will conform to the form requirements of public / for profit schools.

1. **School Name** – This is the name your school will be utilizing and which will appear on your approval certificate issued by DCJS. If the name of the school is other than your own legal name, the name must be registered. Before filing your Business Certificate as a Sole Proprietor or Partnership, the County Clerk's Office will make a determination of name availability. The Department of State will make a determination on name availability for a corporation, foreign corporation, limited liability company, limited liability partnership, and a limited partnership.

2. **Federal Tax Identification Number or Employer Identification Number** – The school owner (applicant) number from the Internal Revenue Service that identifies the school as a business entity.

3. **School Mailing Address** - Provide the mailing address of the school. School must have physical address on file with DCJS, however, mailing address can be a PO Box. In this case note complete physical address in line 3, then "Mail – PO Box __" in same line. Mailing address city, state and zip code should be entered in labeled fields.

4. **Type of Ownership** – Proprietorship, partnership, corporation, Not for Profit Corporation, public or private collegiate educational institution, public or private educational institution, governmental agency/entity, or other.

5 – 8**.** **School Owner or Corporation (Applicant), contact and other required information** – If corporation, this should be exactly as it appears on your Certificate of Incorporation. Enter contact information. If sole owner (proprietorship), enter your gender, date of birth, and *social security number. If person, school owner must meet the minimum requirements pursuant to 9 NYCRR Part 6028 to include being an officer, member, or principal currently licensed by the Department of State as a private investigator; watch, guard or patrol agency; or armored car carrier agency; or maintain a valid security guard registration card issued by the Department of State; or maintain a valid armored car guard registration card issued by the Department of State.

Name of School Director, contact and other required information – Enter the name, contact information, gender and social security number of the of the school director. The school director must meet minimum requirements pursuant to 9 NYCRR Part 6028 to include being an officer, member, or principal currently licensed by the Department of State as a private investigator; watch, guard or patrol agency; or armored car carrier agency; or maintain a valid security guard registration card issued by the Department of State; or maintain a valid armored car guard registration card issued by the Department of State.

Name of School Co-Director (if applicable), contact and other required information – Enter the name, contact information, gender and social security number of the school co-director. There is no requirement that an applicant have a co-director. The school co-director must meet minimum requirements pursuant to 9 NYCRR Part 6028 to include being an officer, member, or principal currently licensed by the Department of State as a private investigator; watch, guard or patrol agency; or armored car carrier agency; or maintain a valid security guard registration card issued by the Department of State; or maintain a valid armored car guard registration card issued by the Department of State.

Partners – Enter the name of the partner(s), social security number, date of birth, and contact information. Partners must meet minimum requirements pursuant to 9 NYCRR Part 6028 to include being an officer, member, or principal currently licensed by the Department of State as a private investigator; watch, guard or patrol agency; or armored car carrier agency; or maintain a valid security guard registration card issued by the Department of State; or maintain a valid armored car guard registration card issued by the Department of State.

Exemptions to the UID requirement:
The UID requirement for the existing or prospective school owner, school director or school co-director may be waived by if the security guard training school, or existing or prospective school owner, director or co-director is:
(a) A public or private educational institution operating under the purview of the New York State Education Department or an equivalent agency in another jurisdiction; or
(b) A public entity; or
(c) An entity employing security guards on a proprietary basis for its own use; or
(d) An educational institution conducted on a not-for-profit basis by firms or organizations, provided that such instruction is offered at no charge; or
(e) An employed police or peace officer in good standing.

5-8a. **Affiliation with another school** – The school owner, director, co-director, and partner(s) whose name(s) appear on the application, must state whether they have ever been affiliated with, employed by, or owned another security guard training school. If yes, full details of such association, including any fiscal disallowances, fine or penalty, or any other disciplinary action against them or the school by any Local, State or Federal authorities must be provided on a separate sheet.

5-8b. **Disclosure** – The school owner whose name appears on the application must state whether they:

- Have ever been convicted in this state or elsewhere of a crime or offense that is a misdemeanor or a felony. **If yes**, a written explanation giving the place, sentencing court, nature of the offense, sentence and/or other disposition, a copy of the accusatory instrument (e.g. indictment, criminal information, or complaint) and a Certificate of Disposition must be submitted with the application. A Certificate of Relief from Disabilities, Certificate of Good Conduct or Executive Pardon, if applicable, must be submitted with the application.

- Have any criminal charges (misdemeanors or felonies) pending against them. **If yes**, a copy of the accusatory instrument (e.g. indictment, criminal information, or complaint) must be submitted with the application.

- Has any license, permit, commission, registration, approval, or application for a license, permit, commission, approval, or registration held by them or a company in which they are or were a principal or employee in New York State or elsewhere ever been revoked, suspended, or denied by any state, territory, or governmental jurisdiction or foreign country, for any reason. **If yes,** submit any relevant documents, including the agency determination.

9. **Audio/Visual Equipment** – Identify the type of audio/visual equipment to be used by the school.

10. **Certified Security Guard Instructors** - Enter the names of **ALL** DCJS certified security guard instructor(s) or armed security guard instructor(s) to be utilized by your school. All instructors must possess a valid certification. Instructor certifications are valid for a period of five years, at which time the instructor must apply for renewal. Application to conduct firearms training requires a minimum of one DCJS certified armed security guard instructor. Application to conduct non-firearms security guard training requires a minimum of one DCJS certified security guard instructor.

Enter the social security number, name of instructor as it appears on the certification letter, and type of certification. Check all that apply, GT for General Topics Instructor, FA for Firearms/Armed Security Guard Instructor.

11. **Intent to Provide Security Guard Training** – DCJS provides complete lesson plans for the 8 Hour Pre-Assignment Training Course for Security Guards, the 16 Hour General On-The-Job Training Course for Security Guards, the 47 Hour Firearms Course for Armed Security Guards, and the 8 Hour Annual In-Service Course for Armed Security Guards. Check the boxes for the courses for which the school is using the complete lessons provided by DCJS.

Check the appropriate boxes If your school has developed its own lesson plans for the 8 Hour Pre-Assignment Training Course for Security Guards and/or the 16 Hour On-The-Job Training Course for Security Guards in accordance with Part 6027 of the Official Compilation of Codes, Rules and Regulations of the State of New York (9 NYCRR). **If not completed at time of original application, submit course outline(s) with topics, objectives, duration for each module and a bank of 50 examination questions for review and approval.**

*****Eight Hour Annual In-Service Course for Security Guards**

If an approved security guard training school plans to, or is conducting the Eight Hour Annual In-Service Course for Security Guards, the school is required to develop lesson plans utilizing topics outlined in 9 NYCRR Part 6027. **If not completed at time of original application, the school must submit a course outline with topics, objectives, and duration for each module of instruction for review and approval before being authorized to offer the course.**

12. **Request for Approval of a Training Site** – A Request for Approval of Training Site form must be completed. If the school has more than one training site, the form must be completed for each site. The form must include the square footage of each proposed classroom. Maximum occupancy for any security guard class is 35 students. The maximum occupancy for any one classroom is determined by the fire inspection report, classroom pictures, the floor plan, and the requirement of no less than 16 sq. ft. per student. In some instances the applicant may not yet have rented the premises. DCJS can still act on the application, however, the prospective school must have a training site prior to the approval of the application. You will be contacted by DCJS when the approval process is nearing completion.

Handicap Accessibility - The training site utilized for mandated non-firearms security guard training must be handicap accessible. Title III of the American with Disabilities Act (effective January 26, 1992), requires private businesses to be accessible to persons with disabilities. The applicant must provide digital photographs of the handicap accessibility elements of the building. This is most commonly accomplished through photos of the handicap accessible bathroom and if site is on a floor other than ground floor, photos of the elevator or other appropriate means of conveyance.

DCJS reserves the right to inspect the training site prior to approval.

13. **Applicant Affirmation** – This is an affirmation to the accuracy of information provided on the application, an acknowledgment related to General Business Law section 89-n and the NYS Official Compilation of Codes, Rules and Regulations, and that the school director may be required to attend an orientation seminar. This must be signed and sworn to by the applicant, school director, and school co-director (if applicable) before a notary public.

SECTION II: FORMS AND DOCUMENTATION

1. **Type of Ownership** – Applicants must provide supporting documents with application for type of ownership. If the type of ownership checked on the application is "Other", provide applicable documentation.

a. Sole Proprietorship – Provide consent to do business from county clerk
b. Partnership – Provide copy of partnership agreement
c. Corporation – Provide Certificate of Incorporation and if applicable, certificate of assumed name
d. Not For Profit – Provide Certificate of Incorporation, Letter of Registration from NYS Attorney General's Office, and, if tax exempt, a copy of IRS 501C3 determination letter

2. **Certificate of Occupancy** – Issued by the municipality in which the training site is located to verify that the training site address is approved for use as a school. A valid Certificate of Occupancy must be included with the application. The address on the certificate must be the same address listed in Number 14 (Training Site) on the application. In some

circumstances the applicant may not yet have rented the training site. If this is the case, the Certificate of Occupancy may be missing from the application packet. However, the training site must be rented upon notice to you by DCJS that your approval is nearing completion and a Certificate must be provided for final approval.

A Certificate of Occupancy (CO) is issued by local municipalities to verify that local building codes have been met and the building is suitable for occupancy. It further states the purpose for which the quarters are to be used (i.e. commercial, residential, school, etc.)

To obtain a copy of a CO in NYC, visit the Department of Buildings' Customer Service Counter in your borough office or log on to the Building Information System at http://nyc.gov/bis. If a building was constructed before 1938 and there has been no change in use or additions to the property, it may not have a CO. To obtain proof of the legal use of a building that does not have a CO, you must obtain a "Letter of No Objection" from the Department of Buildings' borough office where the property is located. **Applicant must submit a "Letter of No Objection" should the building not have a CO.**

**A Certificate of Occupancy is required for all training sites; however, certain enterprises may be waived from the requirement that the CO specifically approve the site for school use.*

***Submission of a Certificate of Occupancy is waived for governmental agencies or municipalities and public or private secondary or collegiate-level educational institutions in NY or any other jurisdiction.*

****If a municipality does not issue COs for existing structures, you must submit a letter from the municipality to that effect.*

3. **Zoning Compliance Letter** – Submit proof that the site to be used to conduct training conforms with local zoning laws and regulations. The address in the letter must be the same address listed in Number 14 (Training Site) on the application. To obtain the letter, contact your local Planning Department or municipal clerk for further guidance.

**A Zoning Compliance Letter is required for all training sites; however, certain enterprises may be waived from the requirement that the Zoning Compliance Letter specifically approve the site for school use.*

***Submission of a Zoning Compliance Letter is waived for governmental agencies or municipalities and public or private secondary or collegiate-level educational institutions in NY or any other jurisdiction.*

4. **Fire Inspection** - The premises in which mandated security guard training courses will be conducted must be approved for occupancy by the fire authority of the municipality or county in which the site is located. The inspection / approval must have been completed within the past three (3) years of the date of initial school application. The address listed on the fire inspection must be the same as the address listed in Number 14 (Training Site). In some circumstances the applicant may not yet have rented the premises. If this is the case, the approval may be missing from the application packet. However, the premises must be rented upon notice to you by DCJS that your approval is nearing completion and Fire Inspection must be provided for final approval of the application. To obtain the fire inspection report contact your local Fire Marshal, Fire Department, or Code Enforcement Office for guidance. In NYC the Public Buildings Unit is tasked with coordinating fire inspections. To request an inspection, e-mail a request, on business letterhead, to the Public Buildings Unit at PBU_inspection@fdny.nyc.gov

**A Fire Inspection Report is required for all training sites; however, certain enterprises may be waived from the requirement.*

***Submission of a Fire Inspection Report is waived for governmental agencies or municipalities and public or private secondary or collegiate-level educational institutions in NY or any other jurisdiction.*

5. **Floor Plan -** A floor plan depicting room dimensions and layout must be submitted for the training site and for any additional training sites. All standard architectural features such as windows, doors, and permanent fixtures should be clearing labeled. The room number, all dimensions, and the use of each room or space must also be clearly labeled.

**Submission of the floor plan is waived for governmental agencies or municipalities and public or private secondary or collegiate-level educational institutions in NY or any other jurisdiction.*

6. **Digital Photographs -** Digital photographs must be submitted on a CD/DVD disk or USB flash drive. Photographs will show the exterior of the premises, building handicap accessibility elements (ramps, bathrooms, elevators, etc.) and all classrooms identified on the floor plan.

**There are no exemptions to the requirement for digital photographs*

7. **Copy of Lease / Deed / Use Agreement for training site(s)** – A copy of the rental lease, ownership deed or agreement for use of each training site must be provided before final approval of the application can be granted. For all training sites not otherwise leased or owned by the training school, it is required that a dated invoice for the daily rental of the training site accompany each roster / notification of successful completion packet submitted to DCJS. This requirement applies to, but is not limited to, rental of hotel conference rooms, virtual office training rooms, and any other per use rented training space.

   **Submission of a lease, deed, use agreement, or daily rental invoice is waived for governmental agencies or municipalities and public or private secondary or collegiate-level educational institutions in NY.*

8. **Proof of Insurance for the conduct of firearms training** – An applicant applying for approval to conduct firearms training which is self-insured must submit a Certificate of Insurance evidencing comprehensive general liability coverage from an insurance agency licensed to do business in New York State or procured by a duly licensed excess line broker pursuant to §2118 of the NYS Insurance Law in the minimum amount of $100,000 per occurrence and $300,000 in the aggregate which amount shall be available for the payment of claims. The applicant must provide a copy of the Certificate of Insurance. In some circumstances the applicant may not yet have purchased liability insurance. If this is the case, the Certificate of Insurance may be missing from the application packet. However, it must be submitted upon notice to you by DCJS that your approval is nearing completion and the Certificate must be provided for final approval of the application.

SECTION III: SCHOOL PREPARED FORMS

Approved security guard schools are required to have the following forms. Forms may be in a printer's proof format until approval to print the forms is received from DCJS. Refer to the application checklist section for more detailed instructions on content of forms.

1. Printed catalog of mandated security guard training courses to be offered by the school. The catalog must include a description of each course among other information.

2. Printed enrollment agreement. Agents/employees of the school who enroll student(s) must be identified on the enrollment agreement by printed name and signature; and

3. Payment Receipt Form - for issuance to students for verification of payment.

MAIL APPLICATION, DOCUMENTATION AND PAYMENT TO:

NYS Division of Criminal Justice Services
Office of Financial Services, 10th Fl
Director of Finance
80 South Swan Street
Albany, NY 12210

***Do Not Mail Cash, Personal Checks, or Credit Cards**

Security Guard School Application/Renewal Checklist

Use the following checklist to ensure the application is complete, school forms are correct, and all required documentation is made part of the application. Incomplete applications will not be approved. For renewing schools, do not send the supporting documentation unless there has been a change to the approved training site or otherwise requested by the Division.

School Application Information

Application Fee (if applicable) ___

Training Type ___

School Type – Proprietary (no fee charged) Public/For Profit (open to public and fee based) ___

School Name and Address ___

Federal Tax Identification Number ___

Ownership Type . ___

Owner Name and Information ___
**include affiliation and disclosure information*

School Director Name and Information ___
**include DOS UID number, affiliation and disclosure information*

School Co-Director's Name and Information (if applicable) ___
**include DOS UID number affiliation and disclosure information*

Information on Partner(s) provided (if applicable) ___
**include DOS UID number affiliation and disclosure information*

Certified Security Guard Instructors ___

Audio/Visual Equipment

Intent to Provide Security Guard Training ___

8 Hour Annual In-Service Curriculum ___

Training Site Approval Form – Must be completed for each proposed/renewed training site. ___

___

Owner, Director, Co-Director Notarized Signatures

___

Forms and Documentation

Ownership Documents:

___

Copy of Lease / Deed / Use Agreement for Training Site(s)

___

Certificate of Occupancy

Zoning Compliance Letter

___

Fire Inspection Report/Letter

___

Floor Plan ___

Digital Photographs – Photographs must be submitted on thumb drive or disc. ___

Proof of Insurance to Conduct of Firearms Training ___

School Prepared Forms

Catalog – Catalog must contain: ___

1. School name, address and phone number
2. Course descriptions and completion requirements
3. Course pricing
4. DCJS mandated refund policy (compliant with 9 NYCRR Part 6028.7) **see next page*
5. Refund procedure
6. Attendance policy (must be compliant with 9 NYCRR Part 6027)
7. Complaint procedure

Enrollment Agreement - The enrollment agreement must contain: ___

1. School name, address and phone number
2. Student Name, address, phone number
3. Course title(s) and price student is scheduled to take
4. Method of payment
5. Date(s) of the course(s) to be taken by student
7. DCJS mandated refund policy **see next page*
8. Printed name and signature of student and enrolling school agent

Payment Receipt/Invoice – Must contain school name, student name, price and payment type, and date of payment. ___

Mandated refund policy per NYCRR 6028.7– Only use portions that relate to the courses offered by school and the format in which those courses are offered.

Students will receive a 100% refund prior to the start of instruction.

For courses divided between two days, the student will receive a 50% refund if requested before start of second day.

For courses divided into four sessions, the refund schedule shall be 75%, 50%, and 25%.

A security guard training school cannot assess any non-refundable registration fees, cancellation fees, or deposits

If a firearms training school, include the following language:

47 hour firearms course: Student will be entitled to an 85% refund if the cancellation occurs after the initial deadly physical force training begins, but before instruction begins for the firearms handling, safety, proficiency, and qualification component of the course. No refund is owed if the student cancels after the above cited firearms handling component instruction has begun.

New York State Division of Criminal Justice Services

SECURITY GUARD PROGRAM – SECURITY GUARD TRAINING SCHOOL APPLICATION

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APPLICATION TYPE: ☐ **NEW SCHOOL** ☐ **SCHOOL RENEWAL**

TRAINING SCHOOL INFORMATION

TYPE OF TRAINING: ☐ **SECURITY GUARD TRAINING (NON-FIREARMS)** ☐ **FIREARMS SECURITY GUARD TRAINING**

TYPE OF SCHOOL: ☐ **IN HOUSE ONLY / PROPRIETARY** ☐ **OPEN TO GENERAL PUBLIC**

1. School Name	2. Federal Tax ID Number or Employer ID Number	School Code
3. School Mailing Address		Room/Suite
City, State, Zip Code		County
Phone Number:	Website Address:	

4. Type of Ownership of School (check one)
☐ Proprietorship ☐ Partnership ☐ Corporation ☐ Not for Profit Corporation ☐ public or private collegiate education institution
☐ public or private education institution ☐ governmental agency/entity ☐ Other (provide type)_____

5. School Owner or Corporation Name and Dept. of State License Number or UID	Owner's Name and Title	
Street Address	City, State, Zip Code	Phone Number:

If sole owner (proprietor) of school provide the following:

Gender	Date of Birth	*Social Security Number	Email Address

5a. Has the **SCHOOL OWNER** ever been affiliated with, employed by, or owned another security guard training school? ☐ **Yes** ☐ **No**

If **yes**, on a separate sheet of paper, provide full details attached to this application, including any disallowances, fines, or any other disciplinary action against them or the school by any Local, State or Federal authorities.

5b. Has the **SCHOOL OWNER** ever been convicted in this state or elsewhere of a crime, misdemeanor or a felony? ☐ **Yes** ☐ **No**

If yes, you must submit with this application a written explanation giving the place, court jurisdiction, nature of the offense, sentence and/or other disposition. You must submit a copy of the accusatory instrument (e.g., indictment, criminal information or complaint) and a Certificate of Disposition. If you possess or have received a Certificate of Relief from Disabilities, Certificate of Good Conduct or Executive Pardon, you must submit a copy with this application.

Are there any criminal charges (misdemeanors or felonies) pending against you in any court in this state or elsewhere? ☐ **Yes** ☐ **No**

If yes, you must submit a copy of the accusatory instrument (e.g., indictment, criminal information or complaint).

Has any license, permit, commission, registration or application for a license, permit, commission, or registration held by you or a company in which you are or were a principal or employee In New York State or elsewhere ever been revoked, suspended or denied by any state, territory or governmental jurisdiction or foreign country, for any reason? ☐ **Yes** ☐ **No**

If yes, you must submit all relevant documents, including the agency determination, if any.

6. School Director's Name and Date of Birth mm/dd/yyyy	Gender	*Social Security Number
Phone Number:	Email Address (REQUIRED)	Department of State License Number or UID

6a. Has the **SCHOOL DIRECTOR** ever been affiliated with, employed by, or owned another security guard training school? ☐ **Yes** ☐ **No**

If **yes**, on a separate sheet of paper, please provide full details attached to this application, including any disallowances, fines, or any other disciplinary action against them or the school by any Local, State or Federal authorities.

6b. Has the **SCHOOL DIRECTOR** ever been convicted in this state or elsewhere of a crime, misdemeanor or felony? ☐ **Yes** ☐ **No**

If yes, you must submit with this application a written explanation giving the place, court jurisdiction, nature of the offense, sentence and/or other disposition. You must submit a copy of the accusatory instrument (e.g., indictment, criminal information or complaint) and a Certificate of Disposition. If you possess or have received a Certificate of Relief from Disabilities, Certificate of Good Conduct or Executive Pardon, you must submit a copy with this application.

Are there any criminal charges (misdemeanors or felonies) pending against you in any court in this state or elsewhere? ☐ **Yes** ☐ **No**

If yes, you must submit a copy of the accusatory instrument (e.g., indictment, criminal information or complaint).

Has any license, permit, commission, registration or application for a license, permit, commission, or registration held by you or a company in which you are or were a principal or employee In New York State or elsewhere ever been revoked, suspended or denied by any state, territory or governmental jurisdiction or foreign country, for any reason? ☐ **Yes** ☐ **No**

If yes, you must submit all relevant documents, including the agency determination, if any.

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7. School Co-Director's Name and Date of Birth mm/dd/yyyy	Gender	*Social Security Number
Phone Number:	Email Address (REQUIRED)	Department of State License Number or UID

7a. Has the **SCHOOL CO-DIRECTOR** ever been affiliated with, employed by, or owned another security guard training school? ◯ **Yes** ◯ **No**

If **yes**, on a separate sheet of paper, provide full details attached to this application, including any disallowances, fines, or any other disciplinary action against them or the school by any Local, State or Federal authorities.

7b. Has the **SCHOOL CO-DIRECTOR** ever been convicted in this state or elsewhere of a crime, misdemeanor or felony? ◯ **Yes** ◯ **No**

If yes, you must submit with this application a written explanation giving the place, court jurisdiction, nature of the offense, sentence and/or other disposition. You must submit a copy of the accusatory instrument (e.g., indictment, criminal information or complaint) and a Certificate of Disposition. If you possess or have received a Certificate of Relief from Disabilities, Certificate of Good Conduct or Executive Pardon, you must submit a copy with this application.

Are there any criminal charges (misdemeanors or felonies) pending against you in any court in this state or elsewhere? ◯ **Yes** ◯ **No**

If yes, you must submit a copy of the accusatory instrument (e.g., indictment, criminal information or complaint).

Has any license, permit, commission, registration or application for a license, permit, commission, or registration held by you or a company in which you are or were a principal or employee In New York State or elsewhere ever been revoked, suspended or denied by any state, territory or governmental jurisdiction or foreign country, for any reason? ◯ **Yes** ◯ **No**

If yes, you must submit all relevant documents, including the agency determination, if any.

8. If a Partnership, complete the following for each Partner. **If additional partners, attach additional sheets.**

Partner 1: Name	Gender	*Social Security Number	Date of Birth
Title	Department of State License Number or UID		
Home Address	Phone Number:		

8a. Has this individual ever been affiliated with, employed by, or owned another security guard training school? ◯ **Yes** ◯ **No**

If **yes**, on a separate sheet of paper, provide full details attached to this application, including any disallowances, fines, or any other disciplinary action against them or the school by any Local, State or Federal authorities.

8b. Has this individual ever been convicted in this state or elsewhere of a crime, misdemeanor or felony? ◯ **Yes** ◯ **No**

If yes, you must submit with this application a written explanation giving the place, court jurisdiction, nature of the offense, sentence and/or other disposition. You must submit a copy of the accusatory instrument (e.g., indictment, criminal information or complaint) and a Certificate of Disposition. If you possess or have received a Certificate of Relief from Disabilities, Certificate of Good Conduct or Executive Pardon, you must submit a copy with this application.

Are there any criminal charges (misdemeanors or felonies) pending against this individual in any court in this state or elsewhere? ◯ **Yes** ◯ **No**

If yes, you must submit a copy of the accusatory instrument (e.g., indictment, criminal information or complaint).

Has any license, permit, commission, registration or application for a license, permit, commission, or registration held by you or a company in which you are or were a principal or employee In New York State or elsewhere ever been revoked, suspended or denied by any state, territory or governmental jurisdiction or foreign country, for any reason? ◯ **Yes** ◯ **No**

If yes, you must submit all relevant documents, including the agency determination, if any.

Partner 2: Name	Gender	*Social Security Number	Date of Birth
Title	Department of State License Number or UID		
Home Address	Phone Number:		

8a. Has this individual ever been affiliated with, employed by, or owned another security guard training school? ◯ **Yes** ◯ **No**

If **yes**, on a separate sheet of paper, provide full details attached to this application, including any disallowances, fines, or any other disciplinary action against them or the school by any Local, State or Federal authorities.

8b. Has this individual ever been convicted in this state or elsewhere of a crime, misdemeanor or a felony? ◯ **Yes** ◯ **No**

If yes, you must submit with this application a written explanation giving the place, court jurisdiction, nature of the offense, sentence and/or other disposition. You must submit a copy of the accusatory instrument (e.g., indictment, criminal information or complaint) and a Certificate of Disposition. If you possess or have received a Certificate of Relief from Disabilities, Certificate of Good Conduct or Executive Pardon, you must submit a copy with this application.

Are there any criminal charges (misdemeanors or felonies) pending against this individual in any court in this state or elsewhere? ◯ **Yes** ◯ **No**

If yes, you must submit a copy of the accusatory instrument (e.g., indictment, criminal information or complaint).

Has any license, permit, commission, registration or application for a license, permit, commission, or registration held by you or a company in which you are or were a principal or employee In New York State or elsewhere ever been revoked, suspended or denied by any state, territory or governmental jurisdiction or foreign country, for any reason? ◯ **Yes** ◯ **No**

If yes, you must submit all relevant documents, including the agency determination, if any.

9. **Audio/Visual Equipment to be used by school (i.e. projector, TV, etc.)**

10. **Certified Security Guard Instructors**

GT= General Topics Instructor / **FA**= Firearms/Armed Security Guard Instructor (Check all that apply).

*Social Security Number	(Last Name, First Name, MI)	Instructor Certifications
		☐ GT ☐ FA
		☐ GT ☐ FA
		☐ GT ☐ FA
		☐ GT ☐ FA
		☐ GT ☐ FA
		☐ GT ☐ FA

If additional space is required, attach a separate sheet.

11. **Intent to Provide Security Guard Training:**

I intend to conduct the security guard training course(s) checked below in accordance with Part 6027 of the Official Compilation of Codes, Rules and Regulations of the State of New York (9 NYCRR) **using the lesson plans in their entirety provided by the Division of Criminal Justice Services.**

DCJS UNARMED COURSES

☐ 8 Hour Pre-Assignment Training Course for Security Guards

☐ 16 Hour On-The-Job Training Course for Security Guards

DCJS ARMED COURSES

☐ 47 Hour Firearms Course for Armed Security Guards (Pistol & Shotgun Course)

☐ 8 Hour Annual Firearms Training Course for Armed Security Guards

*****The school has or will develop its own curriculum for the below courses and the curriculum has been submitted and approved by DCJS for use. *No school may offer the below courses until curriculum is approved by DCJS*. *****

SCHOOL DEVELOPED CURRICULUM

☐ 8 Hour Annual In-Service Training Course for Security Guards – **Develop curriculum in compliance with 9 NYCRR 6027.6**

☐ 8 Hour Pre-Assignment Course for Security Guards – **Develop curriculum in compliance with 9 NYCRR 6027.3**

☐ 16 Hour On-The-Job Training Course for Security Guards – **Develop curriculum in compliance with 9 NYCRR 6027.4**

SA

New York State Division of Criminal Justice Services
SECURITY GUARD PROGRAM – TRAINING SITE APPROVAL REQUEST

12. **School Name:**	School Code:
School Address:	Room/Suite:
City, State, Zip Code:	County:
Phone Number:	
School Owner Name(s):	
School Director Name:	
Training Site Address:	
City, State, Zip Code	County:
Floor (e.g. basement, ground level, 1st, 2nd, 3rd)	Handicap Accessible? ☐ Yes ☐ No

Room #:	Use of room:	Square Feet:	**DCJS USE: student #**
Room #:	Use of room:	Square Feet:	**DCJS USE: student #**
Room #:	Use of room:	Square Feet:	**DCJS USE: student #**
Room #:	Use of room:	Square Feet:	**DCJS USE: student #**
Room #:	Use of room:	Square Feet:	**DCJS USE: student #**

Firearms Facility Name of Range:	
Range Street Address:	County:
City, State, Zip Code:	Range Phone #:
Range Contact:	Contact Phone #:
Number of Lanes:	Indoor ☐ Outdoor ☐
Entity that Approved Range:	Facility meets applicable lead safety standards. ☐ Yes ☐ No
Identify safety features of the range (bullet resistant glass, etc.):	
Classroom At Range:	

Room #:	Use of Room:	Square Feet:	**DCJS USE: student #**
Room #:	Use of Room:	Square Feet:	**DCJS USE: student #**

_____ _____ _____
Printed Name of Requestor (Owner or Director only) Signature of Requestor Date

DCJS USE ONLY: Documents already on file? Y N

Floor plan submitted? Y N **Digital photographs submitted?** Y N **Certificate of Occupancy submitted?** Y N

Zoning letter submitted? Y N **Fire inspection submitted?** Y N **Handicap accessibility?** Y N

Training site approved? Y N **Approved by (printed name)** _____

Signature: _____ **Date:** _____

Comments:

13. **Applicant Affirmation: This affidavit must be signed and sworn to by the Applicant before a Notary Public.** I hereby affirm, under penalties of perjury, that the information provided in this application is true to the best of my knowledge and belief. I understand that any material misstatement may be deemed sufficient reason to deny approval, or may result in the suspension or revocation of the school approval, if issued. I hereby acknowledge that I have thoroughly read and understand General Business Law section 89-n and Parts 6027, 6028, and 6029 of Title 9 of the NYS Official Compilation of Codes, Rules and Regulations. I further understand that the School Director may have to attend the School Director Orientation Seminar if required by Division of Criminal Justice Services (DCJS) and DCJS may ask for additional information/documentation.

Owner: Notary Stamp

_____
Printed Name School Owner

_____ School Owner's Signature

_____ Date

Sworn and subscribed before me
this _____ day of _____, 20_____

_____
Notary Signature

I (school owner) give permission to the Division of Criminal Justice Services (DCJS) to place the school contact information on the publically available listing of approved security guard training schools. _____Yes _____ No

School Director: Notary Stamp

_____
Printed Name of School Director

_____ School Director Signature

_____ Date

Sworn and subscribed before me
this _____ day of _____, 20_____

_____
Notary Signature

School Co-Director (if applicable) Notary Stamp

_____
Printed Name of School Director

_____ School Director Signature

_____ Date

Sworn and subscribed before me
this _____ day of _____, 20_____

_____
Notary Signature

DCJS Use Only

Application approved: Y N

Approved by (print): _____ **Signature:**_____ **Date:** _____

Comments: