MIKE DEWINE
OHIO ATTORNEY GENERAL

Ohio Peace Officer Training Commission
Office 800-346-7682
Fax 740-845-2675

P.O. Box 309
London, OH 43140
www.OhioAttorneyGeneral.gov

APPLICATION FOR PRIVATE SECURITY COMMANDER CERTIFICATION

The application must be completed in its entirety, signed, and notarized. Attach additional documentation as requested.

The following criteria must be met for a private security academic commander certification:

- High school graduate or possession of a GED
- Three years full-time experience in the private security field, a security-related field, or the equivalent, as determined by the executive director. Law enforcement experience does not automatically qualify as security-related experience. The determination of applicability will be based upon the functions performed as a law enforcement officer
- Two years full-time experience in a management-level position, or completion of ninety quarter hours, or sixty semester hours at an accredited college or university
- Three professional references from individuals currently employed in the security or a security-related field in a management-level position, who have known the individual for at least three years
- No convictions for a felony or crime of moral turpitude or any other peace officer disqualifying offense
- Completion of an Ohio Peace Officer Training Commission conference for private security training school commanders
- Joint vocational school private security commanders may be exempted from the three years full-time experience in a private security, a security-related field or equivalent requirement

The following criteria must be met for a private security firearms commander certification:

- High school graduate or possession of a GED
- Five years full-time experience in the private security field, a security-related field, or the equivalent, as determined by the executive director. Law enforcement experience does not automatically qualify as security-related experience. The determination of applicability will be based upon the functions performed as a law enforcement officer
- Three professional references from individuals currently employed in the security or a security-related field in a management-level position, who have known the individual for at least three years
- No convictions for a felony or crime of moral turpitude or any other peace officer disqualifying offense
- Completion of an Ohio Peace Officer Training Commission conference for private security training school commanders

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PROCEDURE FOR OBTAINING A FINGERPRINT-BASED BACKGROUND CHECK FROM THE BUREAU OF CRIMINAL INVESTIGATION AND IDENTIFICATION (BCI)

Fingerprint-based criminal history checks are required for Private Security instructor and commander certification.

In order to obtain a BCI Criminal Background Check you must submit a WebCheck request to BCI, from an approved WebCheck agency. In order to obtain such a record check, follow this procedure:

- Log onto the Attorney General of Ohio's WebCheck website: www.ohioattorneygeneral.gov.
- Scroll to the bottom of the page and click on "Webcheck Locations" under the "Services" heading.
- Locate an agency nearest you and contact them regarding the WebCheck process.
- After completing the WebCheck procedure, have your WebCheck result sent back to you, so that you can attach it to your application.
- Mail your completed application packet to:

Ohio Peace Officer Training Commission
Professional Standards Division
PO Box 309
London, Ohio 43140

Applications received by the commission that do not have the BCI processed record check attached will be returned unprocessed.

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APPLICATION FOR PRIVATE SECURITY COMMANDER CERTIFICATION

Name _____ _____ _____
First Middle Last

SSN_____ DOB _____ Male ____ Female ____

Mailing Address _____
#/Street/P.O. Box

_____ _____ _____ _____
City State Zip Code County

Phone: Residence (_____)_____ Daytime (_____)_____

Cell (_____)_____ FAX (_____)_____

Email _____
NOTE: This email address will be used for OPOTC/OPOTA business-related communications, some of which may be time sensitive.

School Name _____ _____
County

School Address _____ _____ _____ _____
#/Street/P.O. Box City State Zip Code

School Phone (_____)_____ School Fax Number (____)_____

CHECK TYPE OF COMMANDER: ____ **ADULT PROGRAM** ____ **HIGH SCHOOL or JVS PROGRAM**
____ **FIREARMS ONLY**

1. EMPLOYMENT HISTORY (INCLUDE ONLY FULL TIME SECURITY AND LAW ENFORCEMENT)

Employer Name and Address	Employment Dates	Position(s)
_____	From _____/_____/_____ To _____/_____/_____	_____
_____	From _____/_____/_____ To _____/_____/_____	_____
_____	From _____/_____/_____ To _____/_____/_____	_____

Supervisory Experience (Full Time Only)

Employer _____ Position _____ From ____/____/____ To ____/____/____

Employer _____ Position _____ From ____/____/____ To ____/____/____

2. TRAINING/EDUCATION

High School Attended _____ City & State _____

Date of Graduation or Date of Receipt of GED ____/____/____ (Circle Graduation or GED, whichever is applicable.)

Institution Attended _____ City & State _____

Course of Study/Major _____ Dates Attended: From ____/____/____ To ____/____/____

Diploma/Degree Awarded (if applicable) _____ Date ____/____/____
(Attach Copy of Degree/Diploma)

If no degree, number of quarter hours _____ semester hours _____ attended.
(Attach Copy of Transcript from College/University showing number of hours attended)

3. BACKGROUND INFORMATION

Have you ever been convicted of a felony in any jurisdiction of the United States or under the uniform code of military justice?
_____no _____yes

Have you ever been convicted of an offense of domestic violence or any related offense occurring as a result of a domestic violence incident? _____no _____yes

Do you currently have criminal charges pending in any jurisdiction? _____no _____yes

Have you ever been investigated for, disciplined for, terminated for, matters of veracity or of moral turpitude? _____no _____yes
If yes, include a detailed summary.

_____

_____

Attach certified copy of criminal record check processed through BCI&I to the completed application.

4. PROFESSIONAL REFERENCES

	Name	Position	Company
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Attach letters of reference from the above-named individuals. These must accompany application.

MUST APPEAR IN PERSON BEFORE A NOTARY TO COMPLETE THE FOLLOWING AFFIDAVIT

AFFIDAVIT

I declare under the penalty of perjury that the information in this Application is true and correct to the best of my knowledge.

_____ _____
Signature Date

Subscribed and sworn personally before me by the above-named Affiant, this _____ day of _____ , 20____ , at _____, in the County of _____, and State of Ohio.

_____
Printed name of Notary

(Seal)

_____
Signature of Notary

_____
Date notary commission expires