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 RENEWAL OF
PRIVATE SECURITY COMMANDER CERTIFICATION

Certification shall be renewed every three years. At least sixty days and no more than ninety days prior to expiration of the certificate, the individual shall submit an application for renewal.

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

- Must conduct at least two courses within the three-year period

- Attend at least one commander conference conducted by the commission. Should the commission not conduct a conference within the period of certification, this requirement will be suspended for the affected renewal. Should the commission conduct only one conference within the period of certification but the individual fails to attend, this requirement can be met by completing another orientation program, as conducted by commission staff.

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APPLICATION FOR RENEWAL OF 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

Certification: ( ) Academic Training Check one: ( ) Adult Program or ( ) H.S./JVS Program

( ) Firearms and Requalification Only

OPOTC Commander Certification Number: _____ Expiration Date: _____

NOTE: It is the responsibility of each commander to ensure his/her certificate is current.

1. Conducted the following courses: **(Attach written evidence, copy course closing letter)**

NAME OF SCHOOL	COURSE NUMBER	DATES OF COURSE
_____	_____	_____
_____	_____	_____

2. Private security commander conference attended: **(Attach copy of private security commander conference certificate or documentation from commission staff of orientation)**

CONFERENCE LOCATION	DATE ATTENDED
_____	_____

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

_____

_____

_____

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