State of Utah Department of Commerce

Division of Occupational and Professional Licensing

☐ Unarmed Private Security Officer ☐ Armed Private Security Officer ☐ Armored Private Security Officer						
		APPLICANT INFORMATION	ON			
Full Le	gal Name:					
	First	Middle	Last			
All Pre	vious Legal Names	:				
Other I	DOPL Licenses Hel	d:				
		Date of Birth:				
Addres	ss:					
		uding Apt/Unit/Ste #) and/or PO Box				
	City	State	ZIP Code			
Phone		Email:				
riione	·	Email:Note: All Division	on notices and communication will be sent to this email.			
or Sta	If you do not hold a	f Issue License Number US Driver License or a US State ID, you must nt(s) showing evidence of lawful presence in t	present a legible copy of your current and valid			
		AFFIDAVIT AND RELEAS	SE			
1. ce	ertify that I am qualifi	ed in all respects for the license for which I am	applying in this application.			
2. I ce	I certify that to the best of my knowledge, the information contained in the application and all supporting document(s) are true and correct, discloses all material facts regarding the applicant, and that I will update or correct the application as necessary, prior to any action on my application.					
for Lic	I authorize all persons, organizations, governmental agencies, or any others not specifically listed, which are set forth directly or by reference in this application, to release to the Division of Occupational and Professional Licensing, State of Utah, any files, records, or information of any type reasonably required for the Division to properly evaluate my qualifications for licensure/certification/registration by the State of Utah.					
rec	I understand that it is the continuing responsibility of applicants and licensees to read, understand, and apply the requirements contained in all statutes and rules pertaining to the occupation or profession for which I am applying, and that failure to do so may result in civil, administrative, or criminal sanctions.					
	I certify that I do not currently pose a direct threat to myself, to my clients, or to the public health, safety or welfare because of any circumstance or condition.					
6. I uı	•	esponsible to update the Division of any chanຸ	ges relating to my			

	QUALIFYING QUESTI	UNNAIRE				
	Do not leave any quest DOPL may request additional documentation if the					
1. Yes No	Have you EVER had a license, certificate, permit, or registration to practice a regulated profession denied, conditioned, curtailed, limited, restricted, suspended, revoked, reprimanded, resigned, or surrendered while under investigation, or otherwise disciplined in any way ?					
2. Yes No	Do you CURRENTLY have any criminal	action active or pending?				
3. ☐ Yes ☐ No	WITHIN THE PAST 10 YEARS, have you in abeyance, or been convicted of a mis	pled guilty to, no contest to, entered into a plea edemeanor in any jurisdiction?				
4 . ☐ Yes ☐ No	Have you EVER pled guilty to, no contest convicted of a felony in any jurisdiction?	st to, entered into a plea in abeyance, or been				
If you answered "Yes" to any of the above questions, enclose with this application complete information with respect to all circumstances and the final result, if such has been reached. If you answered "Yes" to questions 2,3, or 4 you must submit the following for EACH and EVERY incident: • personal account of the incident • court record(s) • probation/parole officer report(s) If you are unable to obtain any of the records required above, you must submit documentation on official letterhead from the police department and/or court indicating that the information is no longer available. **NOTE:* • DISCLOSE charges that were later held in abeyance, diverted, reduced, or dismissed. • DISCLOSE motor vehicle offenses such as driving while impaired or intoxicated. But you do not need to						
 disclose minor traffic offenses such as parking or speeding violations. You do not need to disclose juvenile offenses, unless you were tried as an adult. DISCLOSE if you are restricted from possession, purchase, transfer, or ownership of a firearm or ammunition (even if your restriction is based on a non-reportable juvenile conviction). You do not need to disclose legally expunged or sealed criminal history incidents. 						
For more information, see <u>DOPL's criminal history FAQs</u> .						
	AFFIDAVIT					
In accordance with Utah Code Ann. § 78B-5-705, I declare under criminal penalty of the State of Utah that the foregoing is true and correct.						
Signature:		Date:				
Printed Name: Knowingly making a false written statement as provided under Utah Code Ann. §78B-5-705 is a class B misdemeanor.						
	PROFESSIONAL LIC	ENSES				
List all other licenses, registrations or certification issued by any state which you now hold or have ever held in any profession. (Use additional sheets if necessary.)						
Profession:		License Number:				
Issuing State:	License Status:	Issue Date:				
Profession:		License Number:				

Issue Date:

_____License Status: ___

Issuing State:

CRIMINAL HISTORY DISCLOSURE STATEMENT

Fingerprints submitted with this application are used to complete a search through the files of the Utah Bureau of Criminal Identification (BCI) and the Federal Bureau of Investigations (FBI). Prior to submitting fingerprints, you must read and acknowledge, by signing the affidavit below, the Privacy Act Statement found at: https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement. Physical copies of this statement may also be obtained upon request from the Division.

The criminal record information obtained by this search will be used by Division staff to evaluate your ability to obtain licensure in Utah. You may challenge or review your criminal record. For additional information regarding the challenge or review process, please see below.

By signing below, you acknowledge receipt of this information and consent to the background check process described above.

Signature:	Date:
Printed Name:	

Please see our website, <u>www.dopl.utah.gov/fingerprints.html</u>, for required information and approved locations to obtain fingerprints.

REVIEW OF YOUR CRIMINAL RECORD: If you wish to review or challenge the accuracy of the information in your <u>FBI record</u>, you should contact the agency that contributed the information in question. You may also direct the challenge to the FBI. Please see their website at: https://www.fbi.gov/services/cjis/identity-history-summary-checks. You may also contact them via mail at: FBI: CJIS Division, Attn. Criminal History Analysis Team 1, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will forward the challenge to the respective agency.

If you wish to review or challenge the accuracy of the information in your <u>BCI record</u>, you must complete the required "Record Challenge Form", available at: https://bci.utah.gov/criminal-records/criminal-records-forms/, and submit it directly to BCI.

Agency review of a licensing decision based on your criminal record may be obtained by filing a written request for agency review with the Executive Director of the Department of Commerce within thirty (30) days after notification of the decision. Any such request must comply with the requirements of Utah Code § 63G-4-301 and Utah Admin. Code R151-4-902.

OPTIONAL INTERIM PERMIT INFORMATION

☐ I would like to be issued an interim permit and I have provided a current criminal history report, "Right of
Access" from the Bureau of Criminal Identification showing "No Criminal Record Found" with this application

A Security Officer **may** qualify for an interim permit, which is usually issued within two business days and is valid for a period of ninety (90) days if the individual's **criminal record is clear** at the time the individual applies for licensure.

There is no additional charge for an interim permit. Interim Permits will be emailed to the email address listed on the first page of this application. Applications submitted without an email will have their interim permit physically mailed to the address listed.

You must have your interim permit and a valid government issued photo identification on your person while working in a capacity that requires licensure.

NOTE: If you have marked "Yes" to any question on the Qualifying Questionnaire, an Interim Permit will not be issued. The application will be processed in the normal manner.

CERTIFICATION OF INITIAL BASIC EDUCATION

If applying by endorsement, please see the checklist for additional information.

MUST BE COMPLETED BY INSTRUCTOR

DOPL Approved Basic Educat	ion Training Program Nam	ne:	
Name of Instructor:		Instructor Email:	
Name of Student/Applicant:			
Total Course Hours:	Exam Score%:	Date Course Completed:	
In accordance with Utah Code foregoing is true and correct.	Ann. § 78B-5-705, I decla	are under criminal penalty of the State of Utah that the	
	sion, as set forth in R156-6	nas successfully completed a basic education training 63a-603 and R156-63b-603. In addition to this, I certify	
Signature of Instructor:		Date: nder Utah Code Ann. §78B-5-705 is a class B misdemeanor.	
If applying by	y endorsement, please se NSTRUCTOR - FOR ARM	AL FIREARM EDUCATION ee the checklist additional information. MED and ARMORED CAR APPLICANTS ONLY	
DOPL Approved Firearm Train	ing Program Name:		
Name of Instructor:	Instr	ructor Email:	
Name of Student/Applicant:			
Total Course Hours:	Exam Score%:	Date Course Completed:	
In accordance with Utah Code foregoing is true and correct.	Ann. § 78B-5-705, I decla	are under criminal penalty of the State of Utah that the	
	sion, as set forth in R156-6	nas successfully completed a basic education training 63a-604 and R156-63b-604. In addition to this, I certify vision.	
Signature of Instructor:		Date:	
Knowingly making a false	written statement as provided ur	nder Utah Code Ann. §78B-5-705 is a class B misdemeanor.	

APPLICATION CHECKLIST AND INSTRUCTION

This checklist is for your convenience, you do not need to include it with your application. **NOTE:** Incomplete applications will be denied.

Your application is classified as a public record and may be available for inspection by the public, except with regard to the release of information which is sub-classified as controlled, private, or protected under the Government Records Access and Management Act or restricted by other law.

ALL APPLICANTS

The follo	wing items are required to complete your application:
	\$90.00 non-refundable application-processing fee, made payable to "DOPL".
	Supporting documentation for any "yes" answers provided on the "Qualifying Questionnaire".
	Original "Right of Access" Criminal History Report showing "No Criminal Record" if requesting an Interim
	Permit.
	Fingerprints to be used by DOPL for a fingerprint search through the files of the Utah Bureau of Criminal
	Identification (BCI) and the Federal Bureau of Investigations (FBI). Please see our website,
	www.dopl.utah.gov/fingerprints.html, for required information and approved locations to obtain
	fingerprints.

LICENSURE BY ENDORSEMENT

The Division accepts licensure from some jurisdictions as equivalent to Utah for the purpose of satisfying the education requirements for licensure. If you have one year of licensed experience from a jurisdiction that meets these requirements, you do not need to complete training in Utah.

Rather, *in addition* to the items identified for "All Applicants", <u>please submit an official verification of your license from an approved jurisdiction showing that your license is in good standing</u> in lieu of completing the training forms in this application.

To determine if your jurisdiction qualifies, please see the maps posted under the "Apply for a License" section of our website.

Submit the above items with your completed application to:

In person or via express delivery:

Division of Occupational and Professional Licensing Heber M Wells Building, 1st Floor Lobby 160 E 300 S Salt Lake City, UT 84111 **US Postal Service:**

Division of Occupational and Professional Licensing PO BOX 146741 Salt Lake City, UT 84114-6741

If you have questions regarding licensure, please feel free to contact the board directly via email at b3@utah.gov.

Note: DO NOT send applications or payment via email!