



APPLICATION FOR PRIVATE SECURITY OFFICER LICENSE

FAILURE TO TRUTHFULLY ANSWER ANY ITEMS OF THIS APPLICATION MAY RESULT IN DENIAL OF A LICENSE

APPLICATION FEE	\$ 15.00
LICENSE FEE	\$ 95.00
BACKGROUND CHECK FEE	\$ 20.00

City Code §2.3.209: Every application for a Security Officer license shall be submitted with one (1) completed, classifiable fingerprint card and letter of hire. The Security Officer application may be submitted at the Police Operations Center Monday thru Friday, during the hours of 8:00 a.m. to 10:00 a.m.

Applications submitted after 10:00 a.m. will not be processed until the following licensing day. The City Clerk's Office will process applications Monday thru Friday between the hours of 2:00 p.m. to 4:30 p.m.

1. Full Name of Applicant: _____
2. Any other names by which you have been known: _____
3. Present Address: _____
4. Home Phone: _____ Date of Birth: _____ SSN: _____
5. Place of Birth: _____ Race: _____
6. Security Agency for which you will be working: _____
7. Supervisor: _____
8. List residence addresses for 5 years prior to date of this application

<u>ADDRESS</u>	<u>CITY/STATE</u>	<u>FROM</u>	<u>TO</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
9. Have you ever been charged or convicted with a criminal offense, fined, imprisoned, placed on probation, received a suspended sentence, or forfeited bail for any offense in criminal court? (Include misdemeanors and any pending charges). Yes No
10. If yes, list nature of offense(s), date occurred, place occurred and penalties imposed for each offense:



11. List work history for 5 years prior to date of this application (MOST RECENT FIRST)

<u>COMPANY</u>	<u>SUPERVISOR</u>	<u>FROM</u>	<u>TO</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

12. Are you a veteran of U.S. Armed Forces? Yes No

13. If yes, have you ever been tried by a Military Court Martial? Yes No

14. If yes, give nature of offense(s), date occurred, place occurred and penalties imposed for each offense:

15. Have you ever had a security officer license denied, suspended or revoked in this or any other state? Yes No

16. If yes, provide details:

17. State any known physical or mental health problems:

18. Have you ever been involuntarily confined to a mental health institution? Yes No

19. If yes, list reason and location:



OFFICE OF THE CITY CLERK
30 South Nevada Avenue, Suite 101
Post Office Box 1575, Mail Code 110
Colorado Springs, Colorado 80901-1575
(719) 385-5105 Fax: (719) 385-5114

PRIVATE SECURITY OFFICER APPLICATION

SWORN AFFIRMATION

I hereby certify that the statements made by myself and constituting part of this application are true and correct.

I am fully aware that any misrepresentation of any information on this application may be grounds for denial of a license.

I have been furnished with, and am familiar with, the ordinances and regulations pertaining to this application.

I further understand that any violation of the laws of the State of Colorado, or the Ordinances of the City of Colorado Springs, Colorado, can result in denial of this application, or suspension/revocation of my license.

AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize and consent to the release of information and all known records including criminal convictions, if any, to authorized agents of the Colorado Springs Police Department, City Clerk's Office, and any other department requiring the information for approval of this license. This authorization shall be valid for the duration of my license, and any renewals thereof.

Dated: _____

Signature of Applicant(s)

State of Colorado)
) ss.
County of El Paso)

Subscribed and sworn to before me this _____ day of _____, 20 ____

My Commission Expires: _____

Notary Public



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NOTICE

THE POLICE OPERATIONS CENTER (POC) IS LOCATED AT 705 SOUTH NEVADA AVENUE, AT THE CORNER OF NEVADA AVENUE AND RIO GRANDE STREET.

CHECK THE APPLICATION OVER CAREFULLY.

THE APPLICANT'S NAME MUST BE LEGIBLE, CONTAIN THE CORRECT BIRTHDATE, SOCIAL SECURITY NUMBER, AND BE NOTARIZED. OTHERWISE THE APPLICATION WILL BE REJECTED

- 1) DO NOT LEAVE MONEY WITH THE APPLICATION AT THE POLICE OPERATIONS CENTER.
- 2) PLACE THE APPLICATION ONLY IN THE BOX DESIGNATED FOR BACKGROUND CHECKS BETWEEN THE HOURS OF 8:00 A.M. TO 10:00 A.M.
- 3) YOU MAY GO TO THE CITY CLERK'S OFFICE FOR LICENSING THE FIRST DAY YOU DROP OFF YOUR APPLICATION AT THE POC (MONDAY THRU FRIDAY) BETWEEN THE HOURS OF 2:00 P.M. TO 4:30 P.M.
- 4) IF YOU DO NOT GO TO THE CITY CLERK'S OFFICE TO PROCESS YOUR APPLICATION FOR A LICENSE THE SAME DAY YOU DROP YOUR APPLICATION OFF AT THE POC, YOU MAY GO TO THE CITY CLERK'S OFFICE THE NEXT LICENSING DAY (MONDAY THRU FRIDAY) BETWEEN THE HOURS OF 8:00 A.M TO 4:30 P.M.
- 5) BRING THE FOLLOWING TO THE CITY CLERK'S OFFICE WHEN YOUR APPLICATION IS BEING PROCESSED (THE APPLICATION WILL BE PICKED UP FROM THE POLICE DEPARTMENT BY THE CITY CLERK'S OFFICE):

**FINGERPRINT CARD (1 SET)
LETTER OF HIRE FROM YOUR EMPLOYER**

THE FINGERPRINT CARD (1 SET) MUST BE COMPLETELY FILLED IN AND LEGIBLE. YOUR EMPLOYER SHOULD ENSURE THE CARD HAS THE CORRECT INFORMATION; OTHERWISE YOUR APPLICATION CANNOT BE PROCESSED. IF YOU ARE FINGERPRINTED BY SOMEONE OTHER THAN YOUR EMPLOYER, YOU MUST TAKE THE PRINT CARDS OBTAINED FROM YOUR EMPLOYER WITH YOU FOR PROCESSING.

APPLICATIONS ARE PROCESSED AT THE POLICE OPERATIONS CENTER MONDAY THRU FRIDAY.