



**OFFICER NEW HIRE AND EMPOWERMENT REPORT**

*Officer's Name	*MCOLES No
*Employing Agency	*Agency ORI

\*Date of Fully Empowered Status: \_\_\_\_\_

The date the individual will begin serving in the capacity of a fully empowered Michigan law enforcement officer with this agency<sup>1</sup>.

\*Employment Status:     Full Time     Part-time (Check the appropriate Box)

\*Check each Box that you have completed.

I certify that this individual is employed and paid a minimum wage (as defined by the Fair Labor Standards Act of 1938, as amended, 29 USC 206) by the agency<sup>1</sup> as of the Date of Fully Empowered Status listed above.

I have verified that this individual has not been convicted by a judge or jury of a felony<sup>2</sup>, pled guilty to a felony, or pled no contest to a felony, as defined by P.A. 203 of 1965, as amended, MCL 28.602f(i)(ii).

I have verified that this individual does not have a conviction for a misdemeanor crime involving domestic violence. Such a conviction would make the individual ineligible to possess a firearm.

Footnotes

<sup>1</sup>Employing Agency

<sup>2</sup>Felony means a violation of a penal law of this state or another state that is either of the following:

- a. Punishable by a term of imprisonment greater than 1 year
- b. Expressly designated a "felony" by statute

*I recognize that any misrepresentation on my part constitutes fraud and is punishable as a felony under Section MCL 750.218 and/or MCL 750.248.*

\_\_\_\_\_  
\*Signature of Agency Head

\_\_\_\_\_  
\*Date

\_\_\_\_\_  
\*Print Name and Title

\* Required Field – This document will not be accepted if not completed in its' entirety.

<b>AUTHORITY:</b>	1965 PA 203, as amended
<b>COMPLIANCE:</b>	Required
<b>Revised:</b>	August 2006