



MCOLES

Michigan Commission on Law Enforcement Standards

P.O. Box 30633
Lansing, MI 48909 (517) 636-7864

Recognition of Prior Training and Experience

Application Packet

Rev. 1/23/2019

Application Requirements

All applicants for the Recognition of Prior Training and Experience program are required to complete and submit the enclosed application forms to:

Michigan Commission on Law Enforcement Standards
P.O. Box 30633
Lansing, MI 48909 (517) 636-7864

INCOMPLETE APPLICATIONS WILL BE REJECTED AND RETURNED TO THE APPLICANT
The application fee will not be refunded.

All completed applications will be reviewed by MCOLES staff and rejected, approved or denied. The completed original application must be APPROVED by the Commission no later than TWO (2) weeks prior to the start of the program. Application packets and supporting documents must be on original forms.

These instructions are to be used as a guide and DO NOT replace statutory requirements, administrative rules, or additional instructions as laid out by MCOLES staff or instructions provided within the application.

Michigan Commission on Law Enforcement Standards Application Review and Notification

Approval to the RPTE program is not guaranteed. Commission staff will review all applications submitted for the Recognition of Prior Training and Experience process and notify the applicant if approval is granted. Once the notification has been received, it is the responsibility of the applicant to contact the facility that is providing the program or test they desire to attend. A listing of training and testing facilities and schedule will be forwarded with the approval letter.

The Commission has the authority to thoroughly investigate, or cause an investigation to be conducted, on any applicant for compliance with the MCOLES Act, Administrative Rules, or the Commission's policies and procedures (R 28.14602).

A complete application packet consists of, but is not limited to, the following:

1. Application Documents for Licensing Based Upon a Recognition of Prior Training and Experience:

All applicants shall complete the application packet, which includes the following documents:

1. MCOLES Waiver & authorization for release of information
2. Livescan Fingerprint Background Check Request (RI-030)
3. Recognition of Prior Training and Experience Application
4. Candidate's Personal History Statement and Affidavit

All applicants must submit the following with their application packet:

1. Verification of basic training and licensure from your state standard-setting board (POST) (out of state applicants only)
2. Original employment letters from ALL law enforcement agencies where you worked as a fully-empowered police officer
3. The application fee (if applicable - see below).

All application packets must be completed down through the signature line. DO NOT leave an application answer blank. If an application packet question does not pertain to you place "N/A" in the response.

MCOLES staff upon reviewing your application may request additional documentation. If your application is incomplete or you fail to respond to MCOLES staff your application will be purged after 90 days. If this occurs, you will be required to reapply with the full application fee and requirements.

2. Non-refundable Application Fee:

Please make a check or money order out to the 'State of Michigan' and submit it with your application. MCOLES can only accept check or money order payments at this time.

Michigan Preservice Recruit Application Fee

First application – No fee

Second or subsequent application - **\$75.00**

Previously licensed Michigan officer - \$75.00

Previously licensed/certified Out-of-state Applicant - \$150.00

Currently employed and screened by hiring agency – No Fee

Agency must have submitted all screening information into the MCOLES Network and made a conditional offer of employment based on passing the RPTE program.

Employed officers on military leave are exempt from the RPTE requirements under law.

*****APPLICATIONS SUBMITTED WITHOUT THE APPLICABLE APPLICATION FEE WILL NOT BE CONSIDERED*****

3. **Fingerprint processing:**

All applicants -

You MUST be fingerprinted as part of the application process to the Recognition of Prior Training and Experience (RPTE) program. Failure to be properly fingerprinted will result in a denial of your application to the RPTE program. ALL RPTE program applicants shall have a fingerprint based criminal history search completed.

ALL APPLICANTS (MICHIGAN and OUT OF STATE) MUST COMPLETE AND SIGN THE LIVESCAN FINGERPRINT BACKGROUND CHECK REQUEST FORM (RI-030) AND RETURN IT TO MCOLES WITH YOUR APPLICATION

IF YOU ARE ABLE TO BE FINGERPRINTED INSIDE OF MICHIGAN:

You must complete, print and sign the attached Livescan Fingerprint Background Check Request form also known as MSP form RI-030. Take the Livescan Fingerprint Background Check Request form (RI-030) to an approved Livescan vendor to be fingerprinted.

The following link provides information on vendors who may be able to obtain your fingerprints: https://www.michigan.gov/msp/0,4643,7-123-1878_8311-237662--00.html or you may do a web search for "Michigan State Police Livescan Vendors".

You MUST include your signed and completed Livescan Fingerprint Background Check Request form (RI-030) with your application RPTE packet.

Failure to submit your Livescan Fingerprint Background Check Request form (RI-030) to MCOLES with your application will delay or prevent enrollment in the program.

IF YOU ARE AN OUT OF STATE APPLICANT WHO CANNOT BE FINGERPRINTED INSIDE THE STATE OF MICHIGAN:

You must complete, print and sign the attached Livescan Fingerprint Background Check Request form also known as MSP form RI-030. Attach your completed and signed RI-030 to your completed application. – **THIS WILL NOT CAUSE YOUR FINGERPRINTS TO BE SEARCHED FOR CRIMINAL HISTORY PURPOSES, SO YOU MUST FOLLOW THE ADDITIONAL INSTRUCTIONS BELOW.**

For MCOLES to review your fingerprint criminal history response you must be fingerprinted by one of two Livescan vendors that offer non-Michigan resident fingerprinting. These vendors are:

IdentoGO: <https://www.identogo.com/>

BGI Associates LLC: <https://www.bgiassociates.com/>

YOU MUST follow the instructions provided by Identogo or BGI Associates LLC. You will complete the online form for either vendor, print that form and take it to one of their Livescan locations. You must request a fingerprint card from the Livescan vendor. (OUT OF STATE APPLICANTS CAN NOT HAVE THEIR FINGERPRINTS SUBMITTED ELECTONICALLY)

Once you receive your fingerprint card follow the instruction provided by Identogo or BGI Associates LLC for submittal of the fingerprints. Each vendor's instructions are located here:

IdentoGO:
https://www.identogo.com/uploads/general/NonResidentCardScanInstructions_MI_20171107.pdf

BGI Associates LLC:
<https://nebula.wsimg.com/21c192343c1ef4f95a5d37217ea7655c?AccessKeyId=E13FE0846BE349982B70&disposition=0&alloworigin=1>

Please note that Identogo requires you to complete and pay for the fingerprinting services online before you are fingerprinted. Please review the Identogo instructions prior to being fingerprinted

Individuals who cannot be fingerprinted in Michigan may contact MCOLES at 517-636-7864 for additional instructions.

4. **Verification of Training and Certification:**

All out-of-state and tribal applicants must provide verification of successful completion of basic police training and status as a certified or licensed law enforcement officer with at least 2080 hours of certified or licensed employment as a law enforcement officer.

This verification must be **official written confirmation** from the appropriate state standards-setting agency (POST Agency) in the applicant's respective state or the Bureau of Indian Affairs. **A copy of a training certificate will not fulfill this requirement.**

Previously Michigan certified officers and pre-service candidates do not need to supply this information; MCOLES has this on file.

5. **Verification of Employment:**

All applicants must provide written documentation from their previous employing law enforcement agency(s) verifying their prior employment as a certified or licensed law enforcement officer and the hours in which they were employed as a certified or licensed law enforcement officer.

This verification must meet ALL the following requirements:

1. Previous employing law enforcement agencies must submit an original letter **DIRECTLY** to MCOLES, on the agency's letterhead, indicating the following:

- a. The employee's name and identifying information
 - b. The exact dates of employment
 - c. Whether employed full-time or part-time, if part-time the hours worked, and the capacity in which the applicant was employed (see the attached "SAMPLE EMPLOYMENT LETTER").
 - d. Employment letters MUST be signed by the head of the agency or the director of Human Resources.
 - e. **VERIFICATION of prior law enforcement employment MUST BE SENT DIRECTLY TO MCOLES AND MUST BE ORIGINAL DOCUMENTS.**
2. If employed by more than one law enforcement agency, a letter from each agency must be submitted.

Applications submitted without employment verification WILL NOT be processed. The employment letter must indicate the standing in which the employee separated or current employment status.

NOTE: Employment verification is mandatory

**Program/Testing
Requirements**

The Program:

The MCOLES has set guidelines which govern the preparatory program for the Recognition of Prior Training and Experience Examination Process. This program is currently 60+ hours in length and is designed to update the participant in the areas of Michigan's Motor Vehicle Code, Criminal Law and Procedure, First Aid/CPR Certification, and the legal aspects of the use of force in the area of Precision Driving.

The program also provides the participant with a minimum of eight (8) hours of firearms range time with Commission recognized firearms instructors to familiarize the participant with the handgun, shotgun and patrol rifle assessment courses of fire. The time on the range is **NOT** designed for the participants to receive basic firearms instruction. Therefore, the participant should come to the program as if they were prepared to qualify on all courses. An outline of the courses of fire will be included with the approval letter.

The preparatory program is mandatory for pre-service and tribal participants only. However, attendance at a program is strongly suggested for all candidates to ensure successful completion of the examinations.

IMPORTANT:

ALL RECOGNITION OF PRIOR TRAINING AND EXPERIENCE CANDIDATES ARE REQUIRED TO PAY FOR THE LICENSING EXAM FEE SEPARATELY. THIS MUST BE DONE BY CONTACTING PSI AT www.pbstesting.com/mcoles_cert NO LATER THAN FIVE (5) BUSINESS DAYS PRIOR TO THE START OF THE PROGRAM. PSI ACCEPTS VISA, MASTERCARD (DEBIT OR CREDIT), OR MONEY ORDERS. IF YOU ARE PAYING BY MONEY ORDER, YOU MUST SUBMIT PAYMENT TO PSI TEN (10) BUSINESS DAYS PRIOR TO THE START OF THE PROGRAM. IF YOU ARE HAVING DIFFICULTY REGISTERING FOR THE EXAM, PLEASE CALL PSI AT (877) 422-4092.

The Examinations: Firearms:

Participants must qualify at each stage of fire on the handgun, shotgun and patrol rifle assessment course of fire. In the event the candidate does not pass all stages of the handgun, shotgun and patrol rifle in the first assessment, the candidate must successfully complete **the failed portion of the course of fire** on a second assessment. Passing the firearms assessment is mandatory prior to taking the licensing examination. If the candidate fails the second assessment, the candidate must successfully complete the remedial firearms program before being allowed to take the licensing exam.

Licensing Exam:

Participants are required to obtain a passing score on the licensing examination. Participants who fail the licensing exam will be given one opportunity to retest. A candidate who does not obtain a passing score on the retest must enroll in and complete a mandatory basic police training academy in order to be eligible for law enforcement licensing in Michigan.

Assessment and Examination Results:

All participants will be advised of their status in the firearms skill assessment as it transpires. Licensing examination results will be available online through PBS www.pbstesting.com/mcoles_cert 24 hours after completing the exam. Candidates should not call the Commission for results. An employing agency can access the eligibility status of a candidate by using the MCOLES Network – a statewide system.

First Aid Requirements:

All candidates in the Recognition of Prior Training and Experience (RPTE) process are required to possess or obtain the following first aid and CPR certifications. Training for these certifications may be obtained at any Michigan Chapter of the American Red Cross or through a program offered at an MCOLES approved RPTE site. **Proof of first aid and CPR certifications (cards) will be checked at the licensing examination.**

MINIMUM REQUIREMENTS:

Standard First Aid Card **and** Basic Life Support for the Professional Rescuer/Health Care Provider Card (Adult, Child and Infant CPR);

or

- ◆ 43.5 hours Emergency Response Training;

or

- ◆ EMT/Paramedic license in the State of Michigan.

WAIVER & AUTHORIZATION FOR RELEASE OF INFORMATION INSTRUCTION SHEET

The attached WAIVER & AUTHORIZATION FOR RELEASE OF INFORMATION is required for any of the following:

1. Application for employment with a law enforcement agency
2. Application for enrollment into a law enforcement academy
3. Application to the law enforcement licensing process

INSTRUCTIONS

Section A:

To be completed by the applicant of a hiring law enforcement agency, law enforcement academy or RPTE program.

Section B:

The **hiring law enforcement agency or the enrolling academy** must place **their own** agency's name in the blank space provided.

- Section B must be signed and dated by the applicant.
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Section C:

The **hiring law enforcement agency requesting information** must enter **their agency's name** in the blank space provided.

- Section C must be signed and dated by an applicant who is currently or has previously been licensed.
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WAIVER & AUTHORIZATION FOR RELEASE OF INFORMATION

Sections A & B to be completed by all applicants (non-licensed, currently licensed, or previously licensed law enforcement officers)

Section A - Type or print only:

Last Name:	First Name:	Middle Name:	Suffix (Jr, Sr, III):	
Social Security No.*:	Date of Birth:	Phone No.:	Gender [‡] :	Race [‡] :
Residence Address (Street, City, State, Zip):			Highest Degree:	
Drivers License No.:	Issuing State:	E-Mail:		

Section B – Authorization for release of information:

I hereby authorize any individual, agency or organization to furnish to the Michigan Commission on Law Enforcement Standards, the _____¹, their representatives and/or agents (including, but not limited to, academies or contractors) any and all information pertaining to my background and ability to comply with the standards for selection, employment, training and licensing as a law enforcement officer. Such information includes, but is not necessarily limited to: employment, criminal, academic, military, and personal histories; academic, attendance, and driving records; and medical records (includes medical/psychological, including diagnosis and prognosis, if any).

I hereby authorize any individual, agency or organization to release such information upon request. This authorization is executed with the full knowledge and understanding that the information is for official use by the Michigan Commission on Law Enforcement Standards and the _____¹.

Further, I hereby authorize the Michigan Commission on Law Enforcement Standards to release any and all records collected pursuant to this authorization to any individual, agency or organization for the legitimate purposes of fulfilling the Commission's statutory and administrative objectives.

I hereby release any individual, agency or organization, including its officers, employees and related personnel, both individually and collectively, from any and all damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this Authorization for Release of Information, or any attempt to comply with it.

This Authorization shall continue in effect until revoked by me in writing. A photostatic copy of this Authorization shall have the same force as the original.

Applicant Signature:	Today's Date:
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*****Section C to be completed by current or previously licensed law enforcement officers only*****

Section C – Former Michigan employing law enforcement agency authorization:

I hereby authorize any and all of my former employing Michigan law enforcement agencies to provide the _____¹, with a copy of the record regarding the reason or reasons for, and circumstances surrounding, my separation of service created by any former employing law enforcement agency or agencies. **(Under 2017 PA 128, MCL§28.561, et seq. a hiring law enforcement agency shall not hire a law enforcement officer unless the hiring law enforcement agency receives the record regarding the reason or reasons for, and circumstances surrounding, a separation of service from each prior employing law enforcement agency.)**

Applicant signature:	Today's Date:
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AUTHORITY: 1965 PA 203; 2017 PA 128
 COMPLIANCE: Voluntary
 PENALTY: No License Activation/ Employment/
 Academy Enrollment

* This information is confidential.
 Confidential information is protected
 by the Federal Privacy Act.

‡ This information is for
 the purposes of EEO
 reporting only.

¹ Type or print the name of the hiring law enforcement agency or the enrolling academy.

AUTHORITY: MCL 28.162, MCL 28.214, MCL 28.248, & MCL 28.273
COMPLIANCE: Voluntary. However, failure to complete this form will result in denial of request.

LIVE SCAN FINGERPRINT BACKGROUND CHECK REQUEST

Purpose: To conduct a civil fingerprint-based background check for employment, to volunteer, or for licensing purposes as authorized by law.

Instructions: See page two.

I. Authorizing Information									
1. Fingerprint Reason Code LEA	2. Requestor/Agency ID 77062H	2. Agency Name MCOLES			3. Individual ID (MNU-OA) RPTE				
II. Applicant Information: Type or clearly print answers in all fields before going to be fingerprinted.									
1a. Last Name			1b. First Name			1c. Middle Initial		1d. Suffix	
2. Any Alternative Names, Last Names, or Aliases						4. Social Security Number (Optional)			
5. Place of Birth (State or Country)		6. Date of Birth	7. Phone Number		8. Driver's License / State ID Number			9. Issuing State	
10. Home Address			11. City				12. State		13. ZIP Code
14. Sex	14. Race		15. Height		16. Weight		16. Eye Color		18. Hair Color
III. Live Scan Information									
1. Date Printed		2. Picture ID Type Presented			3. Transaction Control Number (TCN)			3. Live Scan Operator*	
*When an individual ID is provided, please enter the ID into the Miscellaneous Number (MNU) field on the Live Scan device. Select OA - Originating Agency Identifier and then enter the unique identifier in the Identification Code field.									
IV. Privacy Act Statement									
<p>Authority: Acquisition, preservation, and exchange of fingerprints and associated information by the Federal Bureau of Investigation (FBI) is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.</p> <p>Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.</p> <p>Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine Uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.</p>									
V. Procedure to Obtain a Change, Correction, or Update of Identification Records									
<p>If, after reviewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wishes changes, corrections, or updating of the alleged deficiency; he/she should make application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Services (CJIS) Division, ATTN: SCU, Mod. D2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that agency to verify or correct the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency. (28 CFR § 16.34)</p>									
VI. Consent									
<p>I understand that my personal information and biometric data being submitted by Live Scan, will be used to search against identification records from both the Michigan State Police (MSP) and the FBI for the purpose listed above. I hereby authorize the release of my personal information for such purposes and release of any records found to the authorized requesting agency listed above.</p>									
Signature:							Date:		

INSTRUCTIONS

Section I:

Authorizing Information:

This section is to be completed by the agency authorized to request civil fingerprint-based background checks.

1. Fingerprint Code:

The fingerprint code identifies the authorizing purpose in law allowing the agency to request the civil fingerprint-based background check. For example, School Employment (SE), Child Protection Volunteer (CPV), Health Care employment (HC).

2. Requesting Agency Identification (ID):

The requesting agency ID is assigned to your agency by the MSP. No request for fingerprinting can be completed without an agency ID. Please ensure the correct fingerprinting reason code and agency Identification is used. The MSP will charge for second requests due to incorrect codes.

3. Agency Name:

The agency name is the legal name of the authorized agency. For schools specifically, the agency name is the name recognized by the Michigan Department of Education.

4. Individual ID (MNU-OA)

The Individual ID is a unique identifier specific to the individual requested to submit fingerprints. An ID such as a state issued licensing number, a Personnel Identification Code (PIC) number, or other similar uniquely issued identifier/number.

Section II:

Applicant Information:

This section can be completed by the authorized agency, the individual, or as a joint effort by both. Section II specifically pertains to the demographic information needed in order to obtain the biometric data of the applicant and is a unique identifier specific to the applicant.

Section III:

Live Scan Information:

This section is required to be completed by the Live Scan vendor operator and must be completed at the time of fingerprinting. After fingerprinting, the applicant shall return this signed and completed document to the requesting agency. The Live Scan operator must return a completed copy of the form to the applicant.



RECOGNITION OF PRIOR TRAINING AND EXPERIENCE APPLICATION

PO Box 30633, Lansing, MI 48909
517-636-7864

INSTRUCTIONS: A DUPLICATION OF THIS APPLICATION OR AN APPLICATION WITH CORRECTED ENTRIES WILL NOT BE ACCEPTED. APPLICATIONS MUST BE APPROVED BY THE COMMISSION NO LATER THAN 2 WEEKS PRIOR TO START OF THE PROGRAM OR TEST, WHICHEVER COMES FIRST. YOU MAY USE A TYPEWRITER OR PRINT LEGIBLY.

1. NAME: LAST		FIRST	MIDDLE	2. SOCIAL SECURITY NO.*	3. GENDER	4. BIRTHDATE
5. HOME ADDRESS NO. STREET CITY STATE ZIP				HOME PHONE		
DRIVER'S LICENSE NUMBER:		ISSUING STATE	E-MAIL:			CELL PHONE
6. RELATIVE OR FRIEND TO NOTIFY IN CASE OF EMERGENCY:			RELATIONSHIP		PHONE	
7. NAME OF TRAINING ACADEMY ATTENDED				DATES OF ACADEMY TRAINING		
				FROM:		TO:
8. NAME OF SECOND TRAINING ACADEMY ATTENDED (IF APPLICABLE)				FROM: TO:		
9. DATE OF STATE RECOGNIZED LICENSURE STATE				TOTAL MONTHS/YEARS EMPLOYED AS POLICE OFFICER		
10. HAVE YOU EVER APPLIED FOR/TAKEN THE MICHIGAN RECOGNITION OF PRIOR TRAINING AND EXPERIENCE EXAMINATION?						
<input type="checkbox"/> YES <input type="checkbox"/> NO						
11. I HAVE READ THE MINIMUM SELECTION & EMPLOYMENT STANDARDS (SEE LINK) & REASONABLY EXPECT I CAN MEET THE STANDARDS.						
<input type="checkbox"/> YES <input type="checkbox"/> NO						
12. HAVE YOU ENCLOSED THE FOLLOWING? A. COMPLETED APPLICATION, RELEASE OF INFORMATION & PERSONAL HISTORY STATEMENT & AFFIDAVIT <input type="checkbox"/> YES B. SUBMIT FEE IN CHECK OR MONEY ORDER <input type="checkbox"/> YES C. LIVESCAN FINGERPRINT BACKGROUND CHECK REQUEST FORM (FORM RI-030) <input type="checkbox"/> YES D. VERIFICATION OF BASIC TRAINING AND LICENSURE FROM STATE STANDARD-SETTING AGENCY (OUT-OF-STATE APPLICANTS ONLY) <input type="checkbox"/> YES E. ORIGINAL EMPLOYMENT LETTERS FROM ALL PREVIOUS LAW ENFORCEMENT EMPLOYERS. THE LETTER/S MUST STATE YOUR STANDING AT THE TIME OF YOUR SEPARATION OR CURRENT STATUS. (SEE SAMPLE EMPLOYMENT LETTER) <input type="checkbox"/> YES				MCOLES USE ONLY A. COMPLETED APPLICATION _____ B. PROOF OF CRIMINAL HISTORY REPORT _____ C. POST INFORMATION _____ D. EMPLOYMENT LETTERS _____ E. APPLICATION FEE _____ CHECKED IN MITN _____ APPROVED _____ DENIED _____		
SIGNATURE _____				DATE _____		

* THIS INFORMATION IS CONFIDENTIAL. DISCLOSURE OF CONFIDENTIAL INFORMATION IS PROTECTED BY THE FEDERAL PRIVACY ACT.

AUTHORITY: 1965 PA203
 COMPLIANCE: Required
 PENALTY: No enrollment/licensure

Michigan Commission on Law Enforcement Standards
RECOGNITION OF PRIOR TRAINING AND EXPERIENCE
CANDIDATE’S PERSONAL HISTORY STATEMENT AND AFFIDAVIT
(Rev. 04/18)

Instructions to the Applicant:

The Michigan Commission on Law Enforcement Standards (MCOLES) requires that all candidates seeking eligibility for law enforcement licensing comply with the Commission’s minimum selection and employment standards. Candidates must meet these standards at the time of entrance into the basic training program or Recognition of Prior Training and Experience (RPTE), and maintain compliance with such requirements throughout the training period and at the time of initial licensing or re-licensing through reciprocity.

One of the selection requirements involves “good moral character.” The state of Michigan Administrative Code (Rule 28.14203(e) requires that candidates must “Possess good moral character as determined by a favorable comprehensive background investigation covering school and employment records, home environment, and personal traits and integrity. Consideration will be given to a history of, and circumstances pertaining to, having been a respondent to a restraining or personal protection order. Consideration shall also be given to all law violations, including traffic and conservation law convictions as indicating a lack of good character.”

The information you provide in this personal history statement will be used in evaluating your background and will assist staff in determining your suitability for the position of law enforcement officer. The information you provide in this document will subsequently be discussed with you and you will be required to file an affidavit in support of the information provided.

Please fill out the questionnaire completely and accurately. Return the completed personal history statement with your application to your academy director, agency, or MCOLES representative. When completing the personal history statement, please keep in mind that:

- (1) The completion of this form is mandatory;
- (2) All statements are subject to verification; and,
- (3) Deliberately making false statements, committing fraud, or failing to disclose requested information are grounds for denying your enrollment into or dismissing you from the training program, including the Recognition of Prior Training and Experience program. Further sanctions by the Commission may be imposed including a two-year ineligibility from applying for enrollment in any training program, or permanently denying your application. Subsequent license revocation may also be imposed for making a material false statement or committing fraud in the application process. (R 28.14602 – 28.14609)

It is to your advantage to respond openly. Any negative factor in your background will be evaluated in terms of the circumstances and facts surrounding its occurrence, and its degree of relevance to the job of a law enforcement officer.

NOTE: Use extra sheets of paper, if necessary, to completely answer the questions on the attached pages.

Do not leave any question responses blank.

PLEASE PRINT IN INK OR TYPE YOUR RESPONSES TO THIS QUESTIONNAIRE!



927 Centennial Way, PO Box 30633, Lansing, MI 48909

**CANDIDATE’S PERSONAL HISTORY STATEMENT AND AFFIDAVIT IN
SUPPORT OF APPLICATION FOR THE RECOGNITION OF PRIOR TRAINING
AND EXPERIENCE**

PLEASE PRINT IN INK OR TYPE YOUR RESPONSES TO THIS QUESTIONNAIRE

PERSONAL INFORMATION				
LAST NAME		FIRST NAME		MIDDLE NAME
DATE OF BIRTH	SOCIAL SECURITY NO.	DRIVER’S LIC. NO.	STATE	
PREVIOUS NAME OR ALIAS-Enter any name changed due to marriage or divorce, legal change to your name, or alias used in official capacity. Provide explanation – documentation may be requested. Last: _____ First: _____ Last: _____ First: _____				
Are you a citizen of the United States? (Proof shall be a birth certificate, US passport, or certificate of naturalization). Yes <input type="checkbox"/> No <input type="checkbox"/>				
HOME ADDRESS		CITY	STATE	ZIP
PHONE NO.	2 ND PHONE NUMBER		E-MAIL	

Authority: 203 PA 1965
 Compliance: Voluntary
 Penalty: No License Activation/
 Academy Enrollment

* This is in accordance with the Federal Privacy Act of 1974, disclosure is voluntary. If necessary, the Social Security Number will be used for identification purposes to ensure proper records are obtained.

EMPLOYMENT HISTORY				
Have you ever been talked to, interviewed, or suspected by an employer of any crime in the workplace?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Have you ever been talked to, interviewed, or suspected by an employer of any form of workplace harassment (inappropriate sexual behavior, sexual harassment, ethnic harassment) or workplace violence (threatening behavior or assaultive behavior)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Have you ever been fired, asked to resign in lieu of termination, or decided to resign during an inquiry into your behavior from any place of employment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
If "Yes" to any of the above, please give the details (include when, where, and the circumstances – use a separate sheet if necessary). Attach all related police reports and court documents.				
Have you ever been an unsuccessful candidate for a law enforcement position (either volunteer or paid) because you did not meet the background requirements or other non-medical employment qualification?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
If "Yes," please give the details (include when, name of agency or academy and the circumstances):				
Please list your previous employers for the last 10 years (current or most recent first). Be specific for the reasons for leaving (resignation in good standing; resignation prior to discipline or termination; termination for violation of rules/policies/law; promoted; reassigned; etc.). Include life-time employment history (paid or volunteer) with any law enforcement agency. Use a separate sheet of paper if necessary.				
Employer Name	Address	Position Held	Dates	
			From	To
Supervisor to Contact	Telephone Number	Reason for Leaving		
Employer Name	Address	Position Held	Dates	
			From	To
Supervisor to Contact	Telephone Number	Reason for Leaving		
Employer Name	Address	Position Held	Dates	
			From	To
Supervisor to Contact	Telephone Number	Reason for Leaving		
Employer Name	Address	Position Held	Dates	
			From	To
Supervisor to Contact	Telephone Number	Reason for Leaving		

MILITARY SERVICE

Applicants with prior military service should submit a copy of their DD Form 214 with their application to the academy or with their application to the MCOLES Recognition of Prior Training and Experience program.

Have you ever served in the armed forces, National Guard, or military reserves? Yes No

If “Yes”, have you ever been the subject of any judicial or non-judicial disciplinary action, or discharged for less than honorable service? Yes No

If “Yes”, please give the details (include branch of service, when, where, and the circumstances):

MOTOR VEHICLE OPERATION

Please list all traffic citations (exclude parking violations) you have received: (Attach a separate sheet if necessary)

APPROXIMATE DATE	NATURE OF VIOLATION (Initial Cause for Stop, Charge or Citation)	TICKETED Y/N	JURISDICTION/AGENCY WHERE VIOLATION OCCURRED	DISPOSITION (Final Disposition - Fine, Points, Probation, Other)

Do you currently have active violation points on your driver’s license? Yes No

If “Yes”, how many points do you have? _____ pts

Has your driver’s license ever been denied, suspended or revoked in this state or any other state, the District of Columbia, a possession or territory of the U.S., or Canada? Yes No

If “Yes”, please provide the details (what, when, where, and why):

Do you currently have any *restrictions* placed on your driver’s license? Yes No

If “Yes”, please explain (nature of restriction and why):

Have you been involved, as a driver at fault, in a motor vehicle accident? Yes No

If “Yes”, please provide the following information:

APPROXIMATE DATE	LOCATION	INVESTIGATING POLICE AGENCY	INDICATE INJURIES

LEGAL HISTORY

Please provide the following information if you have ever been

- interviewed by a police agency as a suspect in, or questioned about, any criminal offense (misdemeanor or felony);
- been arrested or charged with any criminal offense (misdemeanor or felony);
- convicted of any criminal offense (misdemeanor or felony) including: expungements or conviction set asides (MCL780.621); Holmes Youthful Trainee Act dispositions (MCL762.11); or drug court dispositions (MCL333.7411).

Criminal offenses and charges include, but not limited to: conservation law violations; appearance tickets; or criminal traffic violations. (NOTE: Include any diversion programs, delayed or deferred sentencing. Do not include traffic offenses that are treated as civil infractions, see Motor Vehicle Operation above). Attach a separate sheet if necessary.

APPROXIMATE DATE	POLICE AGENCY OR JURISDICTION	INITIAL CHARGE/VIOLATION OR REASON FOR QUESTIONING	FINAL DISPOSITION (Conviction, dismissal, fines, probation, jail, etc.)

Have you ever had a felony conviction “expunged” or “set aside”? Yes No

If “Yes,” please provide the details (nature of crime, county where expunged, and when):

Have you ever been placed on court probation as an adult, or been on parole? Yes No

If “Yes,” please provide the details (when, where, why):

Have you ever been on bail, or personal recognizance, or other release conditions from a court-ordered custody? If “Yes,” explain here: Yes No

Have you ever been required to appear before a juvenile court? Yes No

If “Yes,” please provide the details (when, where, why) and final disposition:

Are you now or have you ever been a plaintiff or defendant in any civil court action? Yes No

If “Yes,” please provide the details (when, where, why):

Have you ever been a respondent to a restraining or personal protection order in this state or any other state or tribal court? A respondent is the person enjoined or prohibited from certain behaviors or actions. Yes No

If “Yes,” please provide dates, court of jurisdiction, and circumstances of the order and final disposition. Use a separate sheet of paper if necessary.

FINANCIAL HISTORY

The basic training academy or MCOLES may require you to submit a current financial or credit history statement to verify the information provided below.

Have you ever filed for or declared bankruptcy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have any of your bills ever been turned over to a collection agency?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been evicted for non-payment of rent?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever had a credit card canceled by the company for unpaid balances?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever had purchased goods repossessed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If you answered "Yes" to any of the above questions, please give the details (when, firms/businesses involved, and the circumstances and final disposition):

EDUCATION HISTORY

Please list your educational achievements here. A high school diploma or GED is required for enrollment into an MCOLES approved academy and for licensing. College degrees are evidence of meeting the high school requirement.

High School	Location	Diploma or GED?	Date
		Yes <input type="checkbox"/> No <input type="checkbox"/>	
College	Location	Degree / Credit Hours	Date
Vocational/Trade School/Other	Location	Degree or Certificate	Date

Have you ever been suspended or expelled from any high school or post-secondary school? (Post-secondary schools include colleges, universities, graduate schools, business and vocational schools.) Yes No

Have you ever been subject to formal discipline procedures, short of suspension or expulsion from school for unacceptable behavior at any high school or post-secondary school? Yes No

If "Yes" to either of the above questions, please explain (include school, date, and circumstances):

Have you ever been denied admission to, withdrew from, or dismissed from, a police training academy or criminal justice academic program? Yes No

If "Yes", please explain (include school/academy, date, and circumstances):

MCOLES STANDARDS AND ELIGIBILITY		
The MCOLES representative must determine if you meet the MCOLES standards and are able to perform the essential job functions of a law enforcement officer. Please answer the following questions. If you have any questions about this information, please contact the Standards Compliance Section (517) 322-1417.		
Have you read and fully understand the current Michigan Commission on Law Enforcement Standards' Minimum Selection and Employment Standards to qualify for law enforcement licensing, and do you attest that you comply with these provisions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever failed to submit to, or tested positive on a drug screen test for employment or licensing?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes," provide details here.		
Have you ever sought and received a written determination from the Michigan Commission on Law Enforcement Standards regarding any situation which may affect compliance with the minimum selection and employment standards?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
To your knowledge, have you ever been investigated by the Michigan Commission on Law Enforcement Standards for an alleged standards violation, or to determine whether you could meet the selection and employment standards?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes," please provide details here and copies of previous written determination.		
Have you ever been removed from, or withdrawn from, an employment application process for any position with a law enforcement agency or with a law enforcement training academy in this state or any other state?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes," please provide details here.		
Have you ever had your law enforcement license or certification in Michigan, or any other state, territory or tribe, denied, suspended, revoked, or restricted by administrative action or stipulation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes," please provide details here.		
Have you ever been convicted of a crime that is a misdemeanor under either Federal or State law that has as an element the use or attempted use of physical force, or the threatened use of a deadly weapon against a current or former spouse, parent, guardian or person with who you cohabitated or have cohabitated or with whom you have a child in common or against any person similarly situated to a spouse, parent or guardian (commonly known as domestic violence)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes," please provide details here. A determination must be made whether you are eligible to possess a firearm under federal law.		
Have you ever been notified by the Michigan State Police that you are subject to restrictions on the purchase of a pistol pursuant to MCL 28.422b?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Any previous employment with any law enforcement /public safety agency (police, corrections, fire, etc.) held, either in Michigan or elsewhere, was in accordance with the Federal Fair Labor Standards Act (paid minimum wages for all hours worked).	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Affidavit of _____

AUTHORITY: 1965 PA 203

When filling out this Personal History Statement please keep in mind that:

1. completion is mandatory,
2. all statements are subject to verification, and
3. deliberately making false statements, committing fraud, or failing to disclose requested information are grounds for denying your enrollment into or dismissing you from the training program, including the Recognition of Prior Training and Experience program. Further sanctions by the Commission may be imposed including a two-year ineligibility from applying for enrollment in any training program, or permanently denying your application. Subsequent license revocation may also be imposed for making a material false statement or committing fraud in the application process. (R 28.14602 – 28.14609)

Candidate's Signature	Date
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PLEASE WAIT TO SIGN BELOW IN THE PRESENCE OF A NOTARY

STATE OF _____)
) ss.
 COUNTY OF _____)

Applicant's Social Security Number: _____

Employing Agency or Training Center: _____

Now comes _____ and being first duly sworn certifies as follows:
 Print Candidate's Name

I agree that the information I have provided above in this Personal History Statement is true, accurate and complete and this document constitutes an official statement within the purview of Michigan statutes and is subject to verification by any employing agency and/or the Michigan Commission on Law Enforcement Standards, and that a failure to fully disclose information required by this affidavit constitutes misrepresentation or fraud as prohibited by MCL 28.609b(1)(d), and, if so, shall constitute grounds for revocation of license as a law enforcement officer in Michigan pursuant to MCL 28.609b(1)(d).

Candidate's Name (print) _____

Candidate's Signature: _____

The foregoing affidavit was acknowledged before me this _____(Date), by _____

(Name of Person) who is personally known to me or who has produced _____(Type of identification) as identification and who did (did not) take an oath.

Signature of Notary _____

Commission in _____ County

Acting in _____ County

Commission Expires _____

(Notary's Stamp/Seal)

AGENCY LETTERHEAD
NAME OF AGENCY STREET
ADDRESS CITY, STATE, ZIP
PHONE NUMBER

Sample Employment Letter

(DATE)

Michigan Commission on Law Enforcement Standards
Standards Compliance Section
P.O. Box 30633
Lansing, MI 48909

To Whom It May Concern:

(CANDIDATE'S NAME), (SS#), was employed with the (NAME OF THE AGENCY) as a full-time (part-time) police officer from (DATE) to (DATE). * While employed with us, (CANDIDATE'S NAME) had full arrest powers to enforce the general criminal laws of (STATE) and was paid at least a minimum wage for all hours worked. (CANDIDATE'S NAME) duties were/are as follows: (LIST DUTIES). **

(CANDIDATE'S NAME) resigned (retired or is currently employed) from the Department in good standing (or provide reasons in detail for separation other than good standing). ***

If you have any further questions in regard to (CANDIDATE'S NAME), please contact (NAME OF PERSON TO CONTACT) at (PHONE NUMBER).

Sincerely,

(Signature of agency head or the director of Human Resources)

(NAME OF AGENCY HEAD and TITLE or the NAME OF THE DIRECTOR OF HR AND TITLE)

* If the applicant is part-time, please make sure that you indicate the total number of hours he/she worked in a fully empowered capacity.

** If the applicant is a Sheriff's Office employee, please indicate the capacity he/she was employed (i.e., road patrol, corrections, etc.) and how long he/she was employed in each capacity.

***This letter MUST state the status of the candidate at this time or at the time of separation.