DPSST **OREGON DEPARTMENT OF PUBLIC SAFETY STANDARDS AND TRAINING** F-7R

APPLICATION FOR RETIRED POLICE OFFICER CERTIFICATION

Requirements for Certification listed on below

			1. DPSST Number
2. Name: Last First MI		**3. Date of Birth**	**4. Social Security Number**
5. Address	**6. Gender** ☐ M ☐ F	**7. Honorably Retired?** ☐ **Yes** ☐ **No**	**8. Retirement Date:**

9. Certification Level(s) at Retirement:
☐ Basic ☐ Intermediate ☐ Advanced ☐ Supervisory ☐ Management ☐ Executive

10. Expiration Date of First Aid Card (M/D/Y) _____ **Expiration Date of CPR Card (M/D/Y)**_____

11. Are you currently affiliated with a law enforcement agency? ☐ **Yes** ☐ **No** **Agency:** _____
Are two (2) fingerprint cards included with this F-7R? ☐ **Yes** ☐ **No**

IMPORTANT:
You must answer all questions truthfully. Oregon law allows the Department of Public Safety Standards and Training to deny or revoke the certification(s) of any public safety officer who falsifies any information submitted on the application for certification or any document submitted. Making false or misleading statements on this document is subject to penalty under ORS 162.055, et al, and ORS 162.305 and is cause to deny or revoke public safety officer certification.

SWORN STATEMENT

12. Have you ever been convicted of a crime, including traffic crimes? ☐ **Yes** ☐ **No**
(Under ORS 161.515, a crime is defined as either a felony or a misdemeanor offense.)

13. Have you ever been discharged for cause from a public safety agency? ☐ **Yes** ☐ **No**

If answer is yes to either 12 or 13, show date, place, disposition, reason and which agency on the back of this form.

14. ☐ **Yes** ☐ **No** I swear/affirm that I am a citizen of the United States. I have read and subscribed to the Code of Ethics. The information contained in this application is true and correct to the best of my knowledge**. I understand that falsification of this document is subject to penalty under ORS 162.055, et al, and ORS 162.305 and is cause to deny or revoke public safety officer certification.**

Applicant's Signature_____ **Date** _____

15. Required Fees:
$40.00 for certification & $46.25 for fingerprint criminal history check
(Additional charge of $24.00 may be required for 3rd submittal if fingerprint cards are rejected by the FBI **)**

Make check payable to: DPSST

Mail to: 4190 Aumsville Hwy, SE, Salem, OR 97317

IMPORTANT: To have police officer authority, a certified honorably retired police officer must be affiliated with and under the direction of a law enforcement agency.

REQUIREMENTS FOR RETIRED OFFICER CERTIFICATION:

a) Applicant shall have retired under honorable conditions
b) Applicant shall have no disqualifying behavior since retirement as indicated by CCH and/or other satisfactory evidence to refute any allegations(s) of disqualifying behavior.
c) Applicant shall have submitted two (2) fingerprint cards to DPSST with this application.
d) Applicant shall have valid First Aid and CPR cards.
e) Applicant shall have paid all required fees.
f) The applicant must apply for retired officer certification by submitting the F-7R application.
g) Applicant's certification must not have been lapsed more than five (5) years.

IMPORTANT: To maintain retired officer certification a new application must be submitted to DPSST every three (3) years with two (2) fingerprint cards and the required fees. Evidence of the required maintenance training must also be provided in order to maintain certification.

FOR DPSST USE ONLY			
CCH/OJIN Check Date/By:	**Fees Received Date/By**	**Date Issued**	**Date Mailed**

Revised 06-06-08

ADDITIONAL INFORMATION OR COMMENTS:

Dept. of Public Safety Standards & Training
4190 Aumsville Hwy. SE, Salem, OR 97317
Phone: 503-378-2431, Fax: 503-378-4600
Web Page: www.oregon.gov/DPSST