Alarm and Unarmed Private Security Instructor <u>Professional Training Exemption</u>
DPSST, Private Professional Certification and Licensing
4190 Aumsville Hwy SE Salem, OR 97317
Ph. (503) 378-8531 Email: dpsst.security@dpsst.oregon.gov

In order to process without delay, please print legibly.

Name _____ PSID# _____

Email _____

By signing, I do hereby swear or affirm, under penalty of perjury, that all the information listed below is complete and accurate and that I did in fact instruct for the number of hours indicated.

Signature: _____ Date: _____
☐ By checking this box, I understand that I have the option to sign this document manually, but I hereby affirmatively consent to use my electronic signature.

- Currently certified **<u>alarm monitor private security instructors</u>** who are also certified as an alarm monitor private security professional are exempt from the required alarm monitor private security professional renewal training if they have documented a minimum of **<u>24 hours delivering any combination of the alarm monitor basic course or the alarm monitor renewal course</u>** **<u>during the current certification period.</u>**

- Currently certified **<u>unarmed private security instructors</u>** who are also certified as an unarmed private security professional are exempt from the required unarmed private security professional renewal training if they have documented a minimum of **<u>28 hours delivering any combination of the unarmed basic course or the unarmed renewal course during the current certification period.</u>**

- List below student names, PSID# (if available), date, hours and course provided.

1. Student Name/PSID# _____

   Date _____ Course _____ Hours _____

2. Student Name/PSID# _____

   Date _____ Course _____ Hours _____

3. Student Name/PSID# _____

   Date _____ Course _____ Hours _____

4. Student Name/PSID# _____

   Date _____ Course _____ Hours _____

5. Student Name/PSID# _____

   Date _____ Course _____ Hours _____

6. Student Name/PSID# _____

   Date _____ Course _____ Hours _____

For additional teaching information use a separate form.

Revised 10/2025