



MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

700 Hour Basic Law Enforcement Training Course APPLICATION INFORMATION AND PROCEDURES

\$300.00 NON-REFUNDABLE APPLICATION FEE MUST ACCOMPANY YOUR APPLICATION

The Missouri Sheriffs' Association Training Academy meets and exceeds the State of Missouri's minimum basic training requirement for Class A Missouri Peace Officer Licensure

Minimum Qualifications for Applicants

- Age Requirement:** Must be 20 years of age prior to start date of academy.
Must be 21 years of age to sit for POST License test at the end of the academy
- Residency:** Must be a citizen of the United States
- Education:** Documented proof of high school education or presentation of a "State High School Equivalency" certificate
- Arrest Record:** Must have no gross misconduct indicating inability to function as a peace officer.
NO FELONY CONVICTIONS or Misdemeanor involving moral turpitude, S.I.S. (Suspended Imposition of Sentence) or S.E.S. (Suspended Execution of Sentence).
(You MUST disclose if you have ever committed a crime, been detained or arrested).
- Driver's License:** Possess a valid driver's license and good driving record.
- Vision:** Vision in each eye must be correctable to 20/40.
- Military:** Must have an "Honorable" discharge or "Under Honorable Conditions" discharge if having served in the military
- Physical & Mental Health:** Must be able to perform strenuous physical and mental practical skills

Locations of Training

Classes begin in January each year except where noted

Camdenton	(Camden Co)	
Poplar Bluff	(Butler Co)	
Reeds Spring	(Stone Co)	
Union	(Franklin Co)	
Warrensburg	(Johnson Co)	
Waynesville	(Pulaski Co)	
Platte (FT)	(Platte Co)	Call / email for start date

Applications to all academy sites must be submitted and received no sooner than 120 days prior to the academy start date and no later than the 15th of the month prior to the start of the academy site selected. It is the responsibility of the applicant to ensure the application is submitted in sufficient time with all necessary documents, and / or follow up clarification documents necessary to complete processing to determine acceptance into the academy prior to the academy start date.

<u>Tuition:</u>	\$5,000 (\$4,000 – if sponsored & paid for by a Sheriff's Office)
<u>Processing & Application Fee:</u>	\$300.00 (NON-REFUNDABLE)
<u>Criminal Background Check Fee:</u>	\$44.75 payable to the MACHS location

Supplies List *(not covered by tuition)*

Uniform Requirements (Student Supplied)

- Black BDU pants
- Black, minimum 6", waterproof tactical boots
- Running shoes
- Shorts / Athletic apparel

Firearms Training

Students are required to furnish their own handgun. Acceptable handguns are semi-automatic 9mm, 40 or 45 caliber. *The Academy will provide a handgun for those under 21 years of age.*

Factory loaded ammunition (NO DIY RELOADS PERMITTED)

YOU WILL BE ADVISED OF QUANTITIES PRIOR TO FIREARMS TRAINING

Full hearing and eye protection

All semi-automatic users must have four (4) low capacity magazines (10 rounds or less) or three (3) high capacity magazines (more than 10 rounds).

- Holster
- Duty belt
- Handcuff case
- Double Magazine Pouch

Practical Application Exercises

Tactical Flashlight – Flashlight should have a minimum of 50 LUMS. Examples of models that would be acceptable: SureFire Models TL-2, NF-3, TL-3, 6P; Streamlight PolyTac Series; Smith & Wesson Delta Force Tactical flashlight, or other flashlights with similar features. Flashlights may be obtained from Galls (www.galls.com), OMB Police Supply (www.ombexpress.com); Quartermaster (www.qmuniforms.com); local police supply shops, some gun shops and some sporting goods stores.

Classroom

Highly recommend a laptop computer (or have access to one) as most student course material will be provided on a USB flash drive

Required: Students will be required to take handwritten notes throughout the academy. Students will need a binder with loose leaf paper, spiral bound notebooks, or composition notebook and ink pen or pencil for all training sessions.

Steps for submitting your application

Applicants are required to read the most current version of the MSATA Rules and Regulations prior to the start date of the academy. The most current version of the MSATA Rules and Regulations is available for downloading from <https://mosheriffs.com/academy>

Step #1 Submit your completed application to the address below.

**Missouri Sheriffs' Association & Training Academy
6605 Business 50 West
Jefferson City, MO 65109-6307**

The following documents need to be included in your completed application packet

- a. A copy of your birth certificate
- b. A copy of your high school or college DIPLOMA, GED certificate or high school transcripts showing the school's name and graduation date
- c. A copy of your DD214, or equivalent document, for each period of military service
- d. Documentation showing change of name, if applicable (marriage license / divorce decree ONLY if you went back to your maiden name)
- e. Missouri Peace Officer License Legal Questionnaire & Authorization form (enclosed)
- f. Missouri Peace Officer License Application (enclosed)
- g. Check or money order for non-refundable application fee of \$300.00 payable to the Missouri Sheriffs' Association & Training Academy for the processing application fee (If the class is cancelled, then a full refund will be made)
- h. A copy of your driver's license
- i. Missouri Sheriffs' Association applicant questionnaire (enclosed)

Step #2 Fingerprinting process is completed through a MACHS vendor. You will need to follow the fingerprinting instructions included in the application packet

- a. ***Your 4 digit registration number is 5989***
- b. You will be printing for a standard State and FBI search. ***You must print for both.*** The combined fee for this process is \$44.75.

Your prints MUST be taken before December 15 for January classes

Step #3 If approved, you will be notified of your acceptance to the Missouri Sheriffs' Association Training Academy

Each academy site must have a minimum number of students to start. Applicants, if a training site does not receive enough acceptable students to start, you will be offered the opportunity to transfer to another site or given a refund of their application fee.



MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

Basic Training Application

Which location are you applying for? (Please circle one)

Part Time classes: Camdenton Poplar Bluff Reeds Spring
(begin each January) Union Warrensburg Waynesville

Full Time classes: Platte County *(call or email for start date)*

How did you hear about the MSA Basic Academy? _____

PRINT IN YOUR OWN HANDWRITING all requested information legibly in **BLACK or BLUE** ink and submit it by mail to:
Missouri Sheriffs' Association
6605 Business 50 West, Jefferson City, MO 65109

Applicant Contact Information

Date _____

Last Name	First Name	MI
Previous last names used (including maiden name)		

PLEASE INCLUDE A COPY OF DOCUMENTATION IF LAST NAMES ARE DIFFERENT

Social Security No
Age
Date of Birth
Email Address
Mailing Address
City, State, Zip
Home Phone No
Daytime Phone No
Cell Phone No

Person to Notify in Case of Emergency

Name
Relationship
Address
City, State, Zip
Home Phone No
Daytime Phone No
Cell Phone No

Education

(High School Graduation or GED Equivalency is Required)

High School
City & State
Did you graduate? YES <input type="radio"/> NO <input type="radio"/> MONTH & YEAR

If you have a GED, please complete the following:

Year Obtained
City & State

Please indicate below all colleges / universities previously attended (if applicable)

Name	State	Dates of Attendance	Major	Date Graduated

Employment

List all jobs you have had in the past five (5) years – **BEGIN WITH THE CURRENT OR MOST RECENT**

Employer	Type of Work	Dates (Start and End Dates)	Reason for Leaving

Military / Driving / Arrest Records

1. Are you a military veteran or currently serving in the military? Yes No
2. Branch of Service: _____ Unit / Address: _____
Date of Discharge: _____ Discharge Type: _____
3. Do you have a valid driver's license? Yes No
4. Has your driver's license ever been suspended or revoked? Yes No
5. Have you ever been arrest for a felony: Yes No
6. Have you ever been arrested for a misdemeanor? Yes No
7. Have you ever been convicted of a felony, including the receiving of a Suspended Imposition of a Sentence following a plea or finding of guilty to a felony charge? Yes No
8. Have you ever been convicted of a misdemeanor involving moral turpitude? Yes No
9. Have you ever committed a criminal act or used illegal drugs? Yes No

If you answered "YES" to questions 4 through 9, please explain and provide A DETAILED PERSONAL STATEMENT FOR EACH INCIDENT describing the circumstances leading up to, during, and the final disposition of the incident. If necessary, attach the statement(s) on a separate piece of paper to the application.

Detailed Personal Statement

Driving History

Provide a list of all traffic violations you have received in the past including any “suspended imposition of sentence” convictions. Use additional paper attached to the application if necessary. **THIS INFORMATION MUST ALSO BE DISCLOSED ON YOUR MISSOURI PEACE OFFICER LICENSE LEGAL QUESTIONNAIRE.**

Date of Violation	Agency / Location	Violation Stopped For	Violation Convicted for / Court Disposition

Provide a DETAILED PERSONAL STATEMENT FOR EACH TIME YOU WERE STOPPED explaining the circumstances leading up to, during the stop, and final disposition of the traffic violation. Use additional paper attached to the application if necessary. **THIS INFORMATION MUST ALSO BE DISCLOSED ON YOUR MISSOURI PEACE OFFICER LICENSE LEGAL QUESTIONNAIRE.**

By my signature below, I certify that that information given herein is true and accurate to the best of my knowledge. I understand that any omission or falsification of the above information will disqualify me from attending the Missouri Sheriffs’ Association Training Academy.

Signature

Date

AUTHORIZATION TO RELEASE INFORMATION

I understand that the Missouri Sheriffs' Association Training Academy will conduct, or cause to be conducted, a law enforcement records inquiry to learn of any criminal record data pertaining to myself. I hereby authorize this inquiry, and the release of such information to the Missouri Sheriffs' Association Training Academy.

Signature

Date

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

Authorization for Release of Information

To Whom It May Concern:

I, (print your name) _____ hereby authorize you to release any and all information regarding my employment, credit, arrest and conviction record, and any other information whether personal or otherwise, that may be necessary to determine my qualifications to attend the Basic Peace Officer Academy and become a Licensed Peace Officer. I further release you from all liability for releasing such information. A paper or electronic copy of this release is valid as if the original maintained on file at:

**Missouri Sheriffs' Association Training Academy
6605 Business 50 West Jefferson City, MO 65109-6307**

PLEASE PRINT THE FOLLOWING INFORMATION

Name _____
Address _____
City, State, Zip _____
Driver's License No _____
Date of Birth _____
Place of Birth _____
Sex _____
Race _____
Height _____
Wright _____
Eye Color _____
Hair Color _____

I sign this agreement voluntarily.

Signature

Date

NOTARY PUBLIC

Subscribed and sworn to before me this _____ day of _____, 20____. I am commissioned as a notary public within the county of _____, state of _____, and my commission expires on _____, 20____.

NOTARY PUBLIC SIGNATURE _____

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

Waiver

Release of All Liability and Assumption of Risk

1. I hereby waive, release and forever discharge the Missouri Sheriffs' Association Training Academy, its agents, representatives, heirs, executors, administrators, successors and assigns, of and from any and all claims, demands, rights and causes of action rising from any and all foreseen losses or diminished value to personal property such as, but not limited to, firearms, accessories and clothing and any and all physical and/or mental injuries sustained by me during all self-defense, physical, role playing, firearms or other training activities held by me during the Academy held on _____ through _____.
This agreement is legal binding upon me, my heirs, executors, administrators and assigns.

2. In signing this release, I assert that:
 - a. I am presently in good physical and mental health
 - b. I am capable of strenuous physical activity
 - c. I am fully aware of, acknowledge and assume all risk of injury during my participation in this training
 - d. I have read and fully understand the terms and conditions of this agreement and sign it voluntarily

Print Name _____

Signature _____

Date _____

Witness _____
(can be anyone)

Signature _____

Date _____

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

Pre-Entrance Requirements for Law Enforcement Trainees

DIRECTIONS:

It is important that you, the applicant, know and understand the entrance requirements in the Missouri Sheriffs' Association Training Academy. Please read and initial each of the following entrance requirements.

- _____ 1. Must have a high school diploma or GED
- _____ 2. Must have visual ability sufficient to operate a vehicle in the State of Missouri (20/40) by both day and night, to observe traffic violations, to read and write reports, correspondence, etc.
- _____ 3. Must have the ability to effectively communicate via radio and telephone.
- _____ 4. Must complete all phases of the application process.
- _____ 5. Must have a good driving record.
- _____ 6. Must have a current valid driver's license.
- _____ 7. Must be of good moral character and personal habits (good background)
- _____ 8. Must have no gross misconduct indicating inability to function as a peace officer.
- _____ 9. **NO FELONY CONVICTIONS**, S.I.S. (Suspended Imposition of Sentence), or S.E.S. (Suspended Execution of Sentence)
- _____ 10. No misdemeanor convictions, S.I.S., or S.E.S. involving moral turpitude.
- _____ 11. Must successfully complete pre-entrance screening and review of Academy application.
- _____ 12. Must be a citizen of the United States.
- _____ 13. Military Veterans must have an Honorable or Under Honorable Conditions Discharge
- _____ 14. Must be capable of strenuous physical / mental activity

By my signature below, I have read and understand the above entrance requirements for the Missouri Sheriffs' Association Training Academy. I understand that failure to comply with any of the above requirements or making any false representation of any kind will result in denial into the Missouri Sheriffs' Association Training Academy or permanent dismissal from the Missouri Sheriffs' Association Training Academy. I also understand that the Missouri Sheriffs' Association Training Academy in no way guarantees a job in law enforcement, but will provide the required training for licensing as a peace officer in the State of Missouri.

I sign this form voluntarily.

Signature _____

Date _____

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

Authorization For Release of Information

I authorize the Missouri Sheriffs' Association Training Academy to release any and all information contained in my Academy file(s) to any law enforcement agency.

Signature _____

Date _____

Witnessed by _____

(can be anyone)

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

Criminal Justice Reference

Each applicant in the Missouri Sheriffs' Association Training Academy must provide one (1) law enforcement or professional reference in order to be considered for acceptance into the Basic Academy program. The reference must be a law enforcement officer currently active either on a local, state or federal level or a professional reference (i.e. supervisor, pastor, business leader). The individual listed as your reference will be contacted.

PLEASE PRINT ALL INFORMATION CLEARLY

Name _____

Title _____

Agency Name _____

Agency Address _____

Work Phone Number _____

Cell Phone Number _____

Email Address _____

Please return the application to: **Missouri Sheriffs' Association and Training Academy**
6605 Business 50 West
Jefferson City, MO 65109-6307

Missouri Sheriffs' Association Applicant Questionnaire

Name: _____

Location of Training: _____

Please answer EVERY question in your own handwriting. If a question is not applicable to you, enter N/A

1. Have you had your fingerprints taken? Yes No

Did you mail, fax or email your fingerprint receipt to the academy? Yes No

If not, please send immediately to gina@mosheriffs.com or fax to 573-635-2128 or mail to:

Missouri Sheriffs' Association and Training Academy

6605 Business 50 West

Jefferson City, MO 65109-6307

2. Part Time courses will be conducted on Tuesday and Thursday evenings from 6:00 to 10:00 p.m. and each Saturday from 8:00 a.m. to 5:00 p.m. In addition, some Sunday sessions will be scheduled. Are you committed to spending this much time on class work, plus study time, to the Academy? Yes No

a. Have you made arrangements with your employer as to the class schedule? Yes No

b. Have you talked with your spouse and family as to the class schedule? Yes No

c. How far one way must you travel to attend the Academy? _____

d. How do you plan to finance the tuition for this course? (financial aid, self pay, etc.)

e. Mandatory Attendance - all missed classes must be made up. Additional costs are the responsibility of the student. Do you understand this? Yes No

3. Have you ever applied for admission to the MSATA or any other law enforcement academy? Yes No

a. If so, when and where?

b. Were you admitted? Yes No

c. If so, why did you leave?

d. Was admission denied? Yes No

e. If so, on what basis was admission denied?

4. Describe any personal attributes, skills and experience you possess and explain how they will benefit you as a law enforcement professional.

5. How confident are you that you can successfully perform the educational / classroom work to be a graduate of the Missouri Sheriff's Association Training Academy and why?

6. Describe the goals and aspirations of your law enforcement career.

7. Give an example of a situation where you helped your colleague perform a particular task in which you had better knowledge on the subject

8. What thought process will you use in a situation where you need to make an immediate decision?

9. You came into the academy classroom and shortly after class began, you notice an odor of alcohol coming from one of your classmates, when they talk to you, you notice their speech is slurred and they are bragging about how tired they are and how much fun and partying they did last night, what would you do?

10. One of the requirements to be accepted in the academy is that the individual be a self-starter. Give us an example of your ability to be a self-starter.

11. You and your classmate are having a conversation, and he tells you he sold a gun over the weekend to John Smith. Both of you have known John Smith for years and you both know that John Smith is a convicted felon for burglary. How would you handle this situation? Remember, even in the academy, some cadets support the Blue wall of silence.

12. Define Professionalism? In your opinion, how should the Professionalism of a Sheriff's Academy Cadet be measured?

13. You are given a number of assignments. How will you prioritize the assignments?

- | | |
|------------------------------------------------|------------------------------------|
| 1. Typing an academy training Incident Reports | 2. Son or daughters sporting event |
| 3. Wife/Husbands Honey do list | 4. Studying for an academy exam |

14. Give me an example of a time when you used your fact-finding skills to solve a problem.

15. Describe a time when you anticipated potential problems for an upcoming exam and developed preventive measures.

16. Explain how your personal life reflects your professional life and vice versa. (We live in a glass bubble, everyone sees when we make a mistake).

17. How do you react when asked to do something beyond your capabilities?

18. Can you describe a situation that really tested your patience, and what your actions were?

19. Do you have any special learning needs we need to be aware of? Yes No

a. If so, what are they?

b. Have you ever been diagnosed by any doctor or educational professional as having any type of learning disorder? Yes No

c. Are you currently taking medication? If yes, please list Yes No

d. Do you have any prior medical condition(s) we should be aware of? Yes No
Explain physical activities involved.

20. Have you ever committed, been arrested, or charged with any criminal offense **(including charges that have been expunged or charges that resulted in your being detained but were later dismissed)**? Yes No

a. If so, what crime did you commit, were arrested for, or charged with and what were the circumstances?

b. Have you ever been convicted of, been found guilty of, or pled guilty to any crime, to include receiving a suspended imposition of sentence (SIS)? Yes No

c. If so, what were the charges?

d. We will be conducting a background check, is there anything that you have not told us that would prevent you from becoming a police officer? Is there anything you have not told us that we might find out that would prevent you from being eligible to be licensed by the state of Missouri as a police officer? If yes, please list. Yes No

21. Have you ever been the respondent to an Order of Protection? Yes No

If so, when and how long was the order for? _____

What were the circumstances?

NOTE: If you are currently under an Order of Protection for domestic violence, you cannot attend the academy.

22. Do you possess a valid Missouri driver's license? Yes No

Has your license ever been suspended or revoked? Yes No

If yes, explain _____

Do you have current auto insurance in effect now? Yes No

23. We will be issuing you a thumb drive with a majority of the study material you will need for the Academy. Do you own or have access to a computer, preferably a laptop that will accept a thumb drive?

Yes No

24. If you have access to a laptop, could you bring it to class? Yes No

25. Shirt size _____

26. How would you like your name to appear on your name tag? _____

27. Do you understand you have to be 21 in order to take the POST licensing exam and subsequently be licensed? Yes No
28. Is the criminal justice reference complete on the application? Yes No
31. List all Social Media you have accounts for and your user name on the account. (You may be requested to provide MSATA access to your account as part of the background investigation. Failure to provide access is grounds for denial of your application).

HELPFUL HINTS FOR YOUR SUCCESS

** bring back pack the first night of class **

** fingerprint receipt needs to be mailed, faxed or emailed to the Missouri Sheriffs' Association **

** if you have been investigated/arrested for a crime or stopped for a traffic violation the MSATA will be obtaining copies of the police reports and court records. You need to provide accurate and detailed information about any incidents. Failure to cooperate during the background investigation may result in the denial of your application **

** MSATA only provides basic law enforcement training and cannot guarantee that the student will be offered employment with any law enforcement agency or other employer **

** Read the MSATA Rules and Regulations manual as early as possible in your application process. The Rules and Regulations are required to be read prior to your first night of class if accepted into the academy. You must follow all grooming, tattoo, and behavior rules and standards **

** The MSATA is approved through the Missouri Eligible Training Provider System (www.jobs.mo.gov) for Workforce Investment Opportunity Act (WIOA) funding. Contact your local Missouri Career Center and ask to speak to the "WIOA Representative." **

**The MSATA is approved for Veterans Educational Assistance and GI Bill Funding. Please contact your local VA representative for assistance in applying for VA funding ([Veterans' Educational Programs \(mo.gov\)](http://Veterans' Educational Programs (mo.gov))) **

Missouri Sheriffs' Association and Training Academy
700 Hour Basic Law Enforcement Training Course
Application Criminal Records Check Procedures

All applicants for the Missouri Sheriffs' Association and Training Academy (MSATA) Basic Law Enforcement Training Course must have a fingerprint based criminal history records check completed. The criminal history records search must be completed through the Missouri State Highway Patrol MACHS System.

1. Go to the Missouri State Highway Patrol MACHS registration page at the below link.
<https://www.machs.mshp.dps.mo.gov/MACHSFP/home.html>
2. Select the "Click here to register with the fingerprint portal" option.
3. The first step in the registration process is to enter your "organization code". Enter "5989". This will ensure that your fingerprint criminal history search report will be processed and submitted properly. Follow the instructions to complete the registration process. If for some reason you have difficulty, or you do not have access to a computer to complete the registration online. You can go to your nearest MACHS/IDEMIA processing center and register at the time you have your fingerprints collected. Please see the FAQ section on registering with MACHS for more information.
4. Locate the nearest MACHS/IDEMIA Office near you. You can call and schedule an appointment to have your fingerprints collected or some locations may allow walk-ins. It is recommended you call the MACHS/IDEMIA office to schedule an appointment or ensure walk-ins are accepted.
5. Report to the MACHS/IDEMIA office and have your fingerprints collected. Ensure you have appropriate photo identification and organization code 5989 with you; and that you have completed all steps above. Ensure you received a fingerprint collection receipt.
6. Submit a copy of your fingerprint collection receipt to the MSATA in one of the following manners:

Mail to:	Missouri Sheriffs' Association, 6605 Business 50 West, Jefferson City, MO 65109 (with your application)
FAX to:	573-635-2128
Email to:	gina@msheriffs.com
7. If you are out of state and cannot go to a MACHS/IDEMIA office, or have other questions concerning the fingerprint criminal history record process, please see the MACHS/IDEMIA Frequently Asked Questions section on the Missouri State Highway Patrol web-page provided to you earlier.



Missouri Peace Officer License Application

Last Revised 10.21.2022



LICENSED TRAINING CENTER INFORMATION

Training Center Name

Missouri Sheriffs' Association & Training Academy

Name (Last, First, Middle)		E-Mail Address		Social Security Number	
Mailing Address		City		State	Zip Code
Telephone Number ()		Date of Birth	Age	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	

ATTESTATION BY APPLICANT

Have you previously applied for admittance into any other a basic law enforcement academy? Yes No

If yes, please indicate the name of the training center AND the state in which it was located: _____

If you did not attend this training center, or your application to attend was not accepted, please list why:

I am aware that causing a material fact to be misrepresented for the purpose of obtaining a peace officer license issued pursuant to Chapter 590 RSMo, is a Class B Misdemeanor.

Signature of Applicant

Date

PLEASE ATTACH ALL DOCUMENTS LISTED BELOW IN THE ORDER THAT THEY ARE REQUESTED.

1. Copy of High School Diploma, GED, or Degree from an accredited college or university.
2. Proof of United States Citizenship: Birth Certificate, Passport, or Naturalization Documentation. If name has been changed, include marriage license, divorce decree, or legal name change documentation.
3. Completed Missouri Peace Officer License Legal Questionnaire **and** the Authorization for Release of Information.
4. Photocopy of the applicant's current state issued driver's license.

ADDITIONAL INFORMATION REQUIRED FROM CERTAIN TRAINING CENTERS

In addition to the three items listed above, the following items are required from the **Missouri State Highway Patrol, the Missouri Department of Conservation, the St. Louis City Police Department, the Kansas City Police Department, and the Springfield Police Department:**

- 1 Agency ORI: _____
- 2 Date Applicant will be Commissioned by your department, unless individual is an open enrollment applicant: _____

SEND THIS FORM AND ATTACHMENTS TO POST

Missouri Department of Public Safety Peace Officer Standards & Training (POST) Program Attn: Cheryl Parris P.O. Box 749 Jefferson City, MO 65102 Phone: (573) 526-2764 Fax: (573) 751-5399 Email: cheryl.parris@dps.mo.gov Website: https://dps.mo.gov/post	FOR POST USE ONLY:	
	POST Test Date: _____	Proof of U.S. Citizenship: _____
	Graduation Date: _____	Diploma/Degree: _____
	IADLEST Check: _____	Legal Questionnaire: _____
	Basic Training Hours: _____	SID# _____
	Processed by: _____	Reviewed by: _____
Program Manager Approval: _____		Date: _____



Missouri Peace Officer License Legal Questionnaire



New Licensure Applicants
Last Revised 09.26.2023

Instructions:

- All basic training applicants shall complete this questionnaire prior to being admitted into a basic training course.
- If the applicant indicates “yes” to the question listed below, submit the questionnaire to the POST Program for review **prior** to admitting the individual into a basic training course.
- Maintain a copy of the completed questionnaire and submit it along with the individual’s Peace Officer License Application.

Licensed Basic Training Center: Missouri Sheriffs’ Association

Applicant’s Name: _____ DOB: _____

Social Security Number: _____ Daytime Telephone Number: _____

Home Mailing Address _____

Have you ever been arrested for, charged with, or committed any criminal offense? (§ 590.080.2(2), RSMo)

YES * NO

*If yes, describe the offense(s) below. If needed, you may attach additional pages.

Date	Charge/Offense	City/County/State	Misd/Felony/Ordinance	Disposition	Arresting Agency

Before signing and submitting the notarized questionnaire, please feel free to discuss any questions you might have with a representative of the POST Program by calling (573)751-3409.

I am aware that causing a material fact to be misrepresented for the purpose of obtaining a peace officer license issued pursuant to Chapter 590 RSMo, is a Class B Misdemeanor.

Signature of Applicant: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20___. I am commissioned as a notary public within the county of _____, state of _____, and my commission expires on _____, 20__.

NOTARY PUBLIC

POST USE ONLY

Based on the information provided, the above listed applicant is eligible for licensure.

POST Program Representative: _____ Date: _____

AUTHORIZATION FOR RELEASE OF INFORMATION

Rev. 10.21.2022

I, _____ hereby authorize any individual, organization, court, or law enforcement agency to release any and all records related to my prior law enforcement training and certification or licensure; any and all records related to any criminal or internal investigation conducted on me; and any and all pre-employment application or employment records pertaining to me, to the Missouri Department of Public Safety's Peace Officer Standards and Training Program for the purpose of obtaining or retaining a peace officer license.

A copy of this authorization will be considered as effective and valid as the original and shall not expire.

Signature of Applicant or Licensee

Date

Subscribed and sworn to before me this _____ day of _____, 20___. I am commissioned as a notary public within the county of _____, state of _____, and my commission expires on _____, 20__.

NOTARY PUBLIC