

Employees: Failure to provide complete and accurate information will result in denial.
Employers: Incomplete applications will be returned. All applications must be legible.

APPLICATION FOR REGISTRATION OF SECURITY OFFICER OR PRIVATE INVESTIGATOR

Applicant/Employer Information

Application for registration of employee for: Security Officer Private Investigator

1. Agency Name _____ Date _____

2. Agency Address _____
Street City State Zip

3. Agency Phone () _____ Agency License Number _____

4. On _____ I informed the applicant of C.G.S. §§ 29-156a (PI) or 29-161q (SO).
(Day/Month/Year)

Signature of Licensee or Designee

Print Name/Title

SO Identification Card # _____

Employee Information

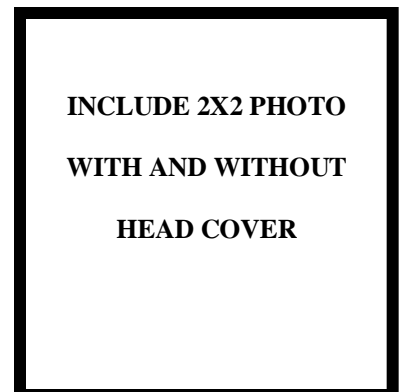
5. Name _____ Date of Birth _____
LAST FIRST MIDDLE

6. Resident Address _____ Telephone (____) _____
Street City State Zip

7. Birthplace _____ Race: _____ Sex: _____ Hgt: _____ Wgt.: _____
City State

8. U. S. Citizen Yes No Alien Reg. No. _____ If Naturalized, Where _____ Date _____
This information is only required if registration is as a Private Investigator.

9. Describe your experience in the position applied for. If you need additional space,
check here and use additional paper.



10. Previous employment for at least the past five years - include occupation, names, and contact information of employers. If you need additional space, check here and use additional paper.

OCCUPATION	EMPLOYER	ADDRESS	DATES EMPLOYED	TELEPHONE

11. Have you ever been convicted in any court of any crime? Yes No
 If yes, list all convictions, including charges, location, date of arrest and disposition. Also, list all pending charges, including nolle within the past 13 months. If you need additional space, check here and use additional paper.

DATE	CHARGE/VIOLATION	LOCATION (Town/State)	DISPOSTION (Fine/time served/probation)

12. Are you vested with police powers? Yes No

I subscribe and affirm under penalties of false statement, that the statements made in this application have been examined by me and to the best of my knowledge and belief are true and correct. I also understand that false statements are punishable in Connecticut pursuant to C.G.S. Section 53a-175b (Class A Misdemeanor) and/or as prescribed in accordance with C.G.S. §§ 29-161, 29-161g, q, x, y, and z inclusive as amended by PA 08-73 with fines up to \$5000 or imprisonment up to one year or both.

STATE OF _____

SS

Signature of Employee

Date of Oath

COUNTY OF _____

APPEARED: _____

Notary Public, Justice of Peace, Pursuant to C.G.S. 1-24
Commissioner of the Superior Court
My Commission Expires: _____

ADDRESS: _____

Subscribed and sworn to before me this ____ day of _____, 20__

FOR AGENCY USE ONLY

This application is: **Approved / Denied**

Date: _____

Reviewed by: _____
Signature Badge Number

Print Name/Title/Badge Number

BASIS FOR DENIAL:

- | | |
|---|---|
| <input type="checkbox"/> Criminal Record (Felony) | <input type="checkbox"/> Non-conforming/Unclear Photographs |
| <input type="checkbox"/> Criminal Record (Misdemeanor) | <input type="checkbox"/> Fingerprint Cards Rejected by S.P.B.I. |
| <input type="checkbox"/> Incomplete/Incorrect Information on Fingerprint Cards | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Incomplete/Incorrect Information on Application: Item Number(s): _____ | |