Employees: Failure to provide complete and accurate information_will result in denial. Employers: Incomplete applications will be returned. <u>All applications must be legible</u>.

APPLICATION FOR REGISTRATION OF SECURITY OFFICER OR PRIVATE INVESTIGATOR

Applicant/Employer Information

	Application for registratio	n of employee for:	Security Offic	er 🗌 Priv	ate Investigator
1.	Agency Name			I	Date
2.	Agency Address Street		City	Si	tate Zip
3.	Agency Phone()	Agenc	y License Number		
4.	On(Day/Month/Year)	I informed the applicar	the applicant of C.G.S. §§ 29-156a (PI) 🗌 or 29-161q 🗌 (SO).		
			Signature o	f Licensee or [Designee
			Prin	t Name/Title	
***	***************************************	********************************			
		Employee Inf	formation		
5.		FIRST MID	DLE	Date of B	lirth
6.	Resident Address	City	State Z	Telepho	one ()
7.	BirthplaceCity	Race: _	Sex:	Hgt:	Wgt.:
8.	U. S. Citizen Yes No Alie This information is only required if regist	n Reg. No ration is as a Private Investigato	If Naturalized, W	here	Date
	Describe your experience in the p leck here 🗌 and use additional p			IN	CLUDE 2X2 PHOTO ITH AND WITHOUT HEAD COVER

DPS-688-C (Rev. 7/11)

1111 Country Club Road, Middletown, CT 06457 Telephone: (860) 685-8046 Internet: <u>www.ct.gov/dps</u> *An Affirmative Action/Equal Opportunity Employer* 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 is and use additional paper.

OCCUPATION	EMPLOYER	ADDRESS	DATES EMPLOYED	TELEPHONE	

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

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

12. Are you vested with police powers?

🗌 No

of my kn 53a-175k	be and affirm under penalties of false statement, that the statements made owledge and belief are true and correct. I also understand that false staten o (Class A Misdemeanor) and/or as prescribed in accordance with C.G.S. §§ ines up to \$5000 or imprisonment up to one year or both.	nents are	punishable in Connecticut pursuant to C.G.S. Section				
STATE C	STATE OF SS		Signature of Employee				
COUNTY	OF		Date of Oath				
APPEAR	ED:	Notary	Public, Justice of Peace, Pursuant to C.G.S. 1-24				
ADDRESS:			Commissioner of the Superior Court My Commission Expires:				
Subscrit	ed and sworn to before me thisday of, 20						
	FOR AGENCY USE ONLY						
This ap	plication is: Approved / Denied	Date:					
Review	Signature Badge Number	Print N	lame/Title/Badge Number				
BASIS I	FOR DENIAL:						
	Criminal Record (Felony)		Non-conforming/Unclear Photographs				
	Criminal Record (Misdemeanor)		Fingerprint Cards Rejected by S.P.B.I.				
	Incomplete/Incorrect Information on Fingerprint Cards		Other:				
	Incomplete/Incorrect Information on Application: Item Number(s):						