

TEXAS COMMISSION ON LAW ENFORCEMENT

6330 E Highway 290, STE 200

Austin, Texas 78723-1035

Phone: (512) 936-7700

<http://www.tcole.texas.gov>

PID ASSIGNMENT (C-1)

Completion of all fields required. Mail or fax form (512) 936-7766.

INDIVIDUAL INFORMATION

1. Social Security Number	2. First Name	3. M.I.	4. Last Name	5. Suffix (Jr., etc.)
6. Race / Ethnicity <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Multicultural <input type="checkbox"/> White		7. Date of Birth	8. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	9. Driver's License State: Num.:
10. Home Mailing Address	11. City		12. State	13. Zip Code
14. Height	15. Weight	16. Hair Color	17. Eye Color	
18. U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	19. Phone Number (include area code)		20. Email	

This form is to be submitted only for the express purpose of having a personal identification number (PID) assigned by TCOLE to the above named individual therein creating a TCOLE record and allowing training to be reported for that individual.

Agency administrator or training coordinator check appropriate box for their student or employee.

- Applying for entry into a basic licensing course.
- Applicant has read and received a copy of §217.1 Minimum Standards for Initial Licensure.

Signature of Applicant

Date

- Future appointment as a Telecommunicator, Temporary or Licensed
- Future appointment as a County or Contract Jailer, Temporary or Licensed
- Future Appointment as a Probation Officer, Juvenile or Adult
- Ability to track training hours

TCOLE agency / training provider number _____ and Name _____

Agency Administrator or Training Coordinator (Type or Print)

Signature

Date

Individuals not associated with a training provider or agency check below.

- Applying for instructors certificate
- Applying for Retired Federal Firearms ID
- Applying for consideration of prior out-of-state, federal, military, or TDCJ training.

Signature of Applicant

Date

TDCJ TRAINING IMPORTANT! PLEASE READ

A TCOLE PID is required on all forms submitted to TCOLE.

Submit the "PID Assignment form" and receive your PID before you spend any money or take any classes. Please do not make any major life decisions or commitments until your application to test has been approved. Questions about this form or your qualifications please call (512) 936-7700.

Individuals, who completed the Texas Department of Criminal Justice (TDCJ) correction training, may apply to take the county corrections exam. All applicants must meet all of the statutory licensing requirements of the State of Texas and the rules of the Texas Commission on Law Enforcement (TCOLE). (See Texas Occupations Code and Commission Rules, available on TCOLE website; www.tcole.texas.gov.)

Under Occupations Code Chapter §1701.310(e), A person trained and certified by the Texas Department of Criminal Justice to serve as a corrections officer in that agency's correctional institutions division is not required to complete the training requirements of this section to be appointed as a part-time county jailer. Psychological examinations under Section 1701.306 apply.

Note: A dishonorable or bad conduct discharge will disqualify applicant. Commission Rule 217.1(a)(13).

To meet the current licensing requirements of TCOLE Rule 217.1, you must have a national criminal history records check based on your fingerprints. One method is to utilize the Fingerprint Applicant Services of Texas (FAST) or submit to DPS a police applicant card bearing TCOLE's ORI number to conduct a fingerprint search. The fingerprint cards are available from TCOLE. Fingerprint cards submitted to DPS take up to a month to process. Questions about fingerprint process call (512) 936-7700.

U.S. citizenship is a requirement to be licensed as a county jailer in Texas.

TDCJ Required Documents to Accompany the Application:

1. A certified or notarized copy of the basic training certificate issued by TDCJ; (If training hours are not indicated on certificate, include a letter from TDCJ verifying number of hours in the course.)
2. A certified or notarized copy of ID issued by TDCJ;
3. A notarized statement from the TDCJ revealing any disciplinary action(s) that may have been taken against any license or certificate issued by that agency or any pending action;
4. A certified or notarized copy of your valid state-issued driver's license
5. A copy of all your military discharge(s) (DD-214) (if applicable),
6. Attach a certified check or money order in the amount of \$150.00 (the application fee is non-refundable and is assessed to cover the cost of reviewing and processing your application).

Preparation for the Licensing Examination

The latest "Texas" editions of the following references are suggested reading.

1. Code of Criminal Procedure
2. Penal Code
3. Health and Safety Code
4. Jail Standards

Texas statutes may be found online at www.statutes.legis.state.tx.us.

Possible sources for the reference material:

Public libraries

College bookstores

West Publications (800) 328-9352

Sterling Publications (210) 438-7110

Lexis-Nexis (800) 833-9844

Texas Commission on Jail Standards (512) 463-5505

The "Basic County Correction Course" outline is on the Commission website, www.tcole.texas.gov, under "Law Enforcement Trainer, Instructor Resources."

Notice

Complete the process for fingerprint check. Complete and submit a notarized application. Attach the non-refundable \$150.00 fee with the required documents, and mail to the Commission. You will be notified of your qualifications to take the exam. You have 180 days from the date of notification to take your allowed exam attempts. Any remaining exam attempts expire per Commission Rule §219.1.

Please allow at least two weeks to receive your notification to test.

A list of test sites can be found on our website at www.tcole.texas.gov. Contact the test site to schedule an exam, directions to site, any exam fee and method of payment.

You will not be allowed to attempt the exam without a state or federal photo ID.

If you have any questions, please call (512) 936-7700.



TCOLE CERTIFICATION

Texas Commission on Law Enforcement

This document is your *FAST Fingerprint Pass* for a state and national criminal history record check. Please schedule a fingerprint appointment by visiting <http://www.identogo.com> or by calling 1-888-467-2080. **When scheduling an appointment you will be prompted by IdentoGO for the following additional personal data: Date of Birth, Sex, Race, Ethnicity, Skin Tone, Height, Weight, Eye Color, Hair Color, Place of Birth and Home Address. During your Fingerprint appointment you will also be prompted for Social Security Number and Driver License Number. Requested data is required by the Texas Department of Public Safety to process your background check.** These data elements have been omitted from this document in order to better protect the security of your

personal information. You may pay for *FAST* services online with a credit card or onsite with a check or money order only. Your fingerprints will be submitted to the Texas Department of Public Safety and the Federal Bureau of Investigation.

1. Logon to <http://www.identogo.com>
2. Select: **Texas**
3. Select: **Online Scheduling**
4. Select: **English or Espanol**
5. Enter: **First and Last Name**
6. Select: **TCLEOSE or TCOLE**

7. Select: **Option A – Electronic Submission**
8. Select: **Yes, I have a FAST Fingerprint Pass**
9. Enter: **TX227011Y**
10. Enter: **Academy Provider Number, LE - 453007**
11. Follow the prompts to enter requested information
12. Bring this completed form with you to your appointment.

Section One: Qualified Entity Information

ORI#: TX227011Y Academy Provider Number: LE 453007

Original TCN: _____
(If resubmission for rejected fingerprints)

- Jailer Peace Officer Telecommunicator

Hiring Agency or Academy Name: Texas Commission on Law Enforcement

Contact: Nazareth Munoz nazareth.munoz@tcole.texas.gov

Hiring Agency or Academy Address: 6330 East Hwy. 290, Ste., 200 Austin TX 78723-1035
Street Address City State Zip

Section Two: Applicant Name (To be completed by applicant)

Last: _____ First: _____ Middle: _____
(Please Print) (Please print) (Please print)

Section Three: Waiver Information (To be completed and signed by applicant)

I certify that all information I provided in relation to this criminal history record check is true and accurate. I authorize the Texas Department of Public Safety (DPS) to access Texas and Federal criminal history record information that pertains to me and disseminate that information to the designated Authorized Agency or Qualified Entity with which I am or am seeking to be employed or to serve as a volunteer, through the DPS Fingerprint-based Applicant Clearinghouse of Texas and as authorized by Texas Government Code Chapter 411 and any other applicable state or federal statute or policy. I authorize the Texas Department of Public Safety to submit my fingerprints and other application information to the FBI for the purpose of comparing the submitted information to available records in order to identify other information that may be pertinent to the application. I authorize the FBI to disclose potentially pertinent information to the DPS during the processing of this application and for as long hereafter as may be relevant to the activity for which this application is being submitted. I understand that the FBI may also retain my fingerprints and other applicant information in the FBI's permanent collection of fingerprints and related information, where all such data will be subject to comparisons against other submissions received by the FBI and to further disseminations by the FBI as may be authorized under the Federal Privacy Act (5USC 552a(b)). I understand I am entitled to obtain a copy of any criminal history record check and challenge the accuracy and completeness of the information before a final determination is made by the Qualified Entity. I also understand the Qualified Entity may deny me access to children, the elderly, or individuals with disabilities until the criminal history record check is completed. If a need arises to challenge the FBI record response, you may contact the agency that submitted the information to the FBI, or you may send a written challenge request to the FBI's Criminal Justice Information Services (CJIS) Division at FBI CJIS Division, Attention: Correspondence Group, 1000 Custer Hollow Road, Clarksburg, WV 26306.

Signature: _____ Date: _____

Section Four: Service Center (To be completed by FAST Enrollment Agent)

Date Prints Taken: _____ Amount Charged For Service: \$ _____

Paid by: Check Money Order Visa MasterCard Billing Acct: _____

TCN: _____

I HAVE COMPARED THE GOVERNMENT ISSUED IDENTIFICATION PRESENTED BY THE APPLICANT AND ATTEST THAT TO MY BEST DETERMINATION, I HAVE FINGERPRINTED THE SAME PERSON.

E.A. Name: _____ E.A. Signature: _____

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**Exam Application
TDCJ Training**

Return this application with a non-refundable fee of \$150.00 (money order, agency or cashier's check) payable to the Texas Commission on Law Enforcement (TCOLE). All documents must accompany this original notarized application.

Please type or print all information.

Date: _____

Last Name: _____ First Name: _____ M.I.: _____ Suffix: _____

TCOLE PID: _____ Driver's License Number: _____ State: _____

Date of Birth: _____ High School Diploma GED

Address: _____ City: _____ State: _____

Zip Code: _____ Phone Number: _____ E-mail: _____

- (5112)** TDCJ training. (Documents must bear original certification seals or stamps)
- A certified or notarized copy of the Basic Training Certificate from TDCJ;
- A certified or notarized copy of ID from TDCJ;
- A notarized statement from the current employing agency revealing any disciplinary action(s) that may have been taken against any license or certificate issued by that agency or any pending action;
- A passport-sized color photograph (head and shoulders), signed with your full signature on the back of the photograph;
or check here to use your Texas drivers license photo.
- A copy of all your military discharge(s) (DD-214) (if applicable);
- Certified check, or money order in the amount of \$150.00.

On signing this document I understand that I will have to meet the requirements of Commission rule §217.1 for licensure. I am fully aware that this application is a government document and, under penalties of perjury, I declare the foregoing information to be true and correct.

_____ Signature of Applicant	_____ Date
Sworn to and subscribed before me, this the _____ day of _____, _____	
Notary public in and for, State of _____ My commission expires _____ / _____ / _____	_____ Printed Name of Notary
Notary Seal or Stamp	_____ Signature of Notary