



**DAVE YOST**  
OHIO ATTORNEY GENERAL



Ohio Peace Officer Training Commission  
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London, Ohio 43140  
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## Student Enrollment/Certification Record

### Student information:

Name: \_\_\_\_\_ Alias: \_\_\_\_\_  
Last First Middle

Home Address: \_\_\_\_\_  
No./Street and/or P.O. Box City County Name State Zip

Phone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Male ☐ Female ☐ DOB: \_\_\_\_\_ SSN (Last 5): \_\_\_\_\_

Email: \_\_\_\_\_

Operator's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Complete if applicable & attach SF400 Notice of Appointment:

Appointing/Employing Agency \_\_\_\_\_ Agency County \_\_\_\_\_

Agency email \_\_\_\_\_ Date of appointment/employment \_\_\_\_\_ Position/Title \_\_\_\_\_

**Race:** \_\_\_\_\_ American Indian/Alaska Native \_\_\_\_\_ Asian \_\_\_\_\_ Black/African American \_\_\_\_\_ Hispanic/Latino  
\_\_\_\_\_ Native Hawaiian/Pacific Islander \_\_\_\_\_ White \_\_\_\_\_ Other

**Education:** ☐ High School Diploma ☐ GED

### Student Status:

<b>Peace Officer</b>	_____ Basic Training _____ Refresher _____ Prior- Equivalent
<b>Private Security</b>	_____ Academic _____ Revolver _____ Shotgun _____ Semi Auto Pistol _____ REQ
<b>Full-Service Facility</b>	_____ Correction Officer _____ Prior Equivalent
<b>Jailer</b>	_____ 12-Day Facility _____ 12-Hour Facility
<b>Court Officer</b>	_____ Basic Training

\_\_\_\_\_  
Commander's Signature Date School Name School Number

### OPOTC use only

Approved ☐ DNC ☐ Open Enrollment ☐ Private Security Requal Due Date: \_\_\_\_\_

Approval Date: \_\_\_\_\_ Exam Date: \_\_\_\_\_

Certification Officer's Initials: \_\_\_\_\_ Last Date of Class: \_\_\_\_\_

Certificate Number: \_\_\_\_\_ Date Certificate Issued: \_\_\_\_\_