



NOTICE OF PEACE OFFICER SEPARATION FROM SERVICE

Date Submitted on the OPOTA Portal:

Disclaimer: Please note this is not to be submitted to OPOTA under any circumstances, all appointments must be done via OPOTA Portal. This document can be used for your agency and agency needs.

| | | |
|---|---|---------------------------------|
| OFFICER INFORMATION | 1. Name (Last) _____ (First) _____ (Middle) _____ | 2. Social Security Number _____ |
| 3. Previous Name(s) or Alias (Last) _____ (First) _____ (Middle) _____ | | |
| 4. Birth date (mm/dd/yyyy) _____ | 5. Officer's Personal Email Address _____ | |
| 6. Home Mailing Address (#/Street/PO Box) _____ (City) _____ (State) _____ (Zip Code) _____ (County Name) _____ | | |

| | | |
|--|----------------------|------------------------------|
| AGENCY INFORMATION | 7. Agency Name _____ | |
| 8. Law Enforcement Agency Administrator's Email Address _____ | | 9. Agency Phone Number _____ |
| 10. Agency Mailing Address (#/Street/PO Box) _____ (City) _____ (State) _____ (Zip Code) _____ (County Name) _____ | | |

| | | |
|--|---|---|
| SEPARATION INFORMATION | 11. Appointment Date (mm/dd/yyyy) _____ | 12. Separation Date (mm/dd/yyyy) _____ |
| 13. Reason for Separation (check appropriate box) | | |
| Resignation – In Good Standing (No Pending Discipline) Resignation – Resignation in lieu of Termination Resignation – Other (Mandatory Explanation required) Resignation – Under Investigation Separation from service or termination for any other reason (<i>please explain below</i>) Misdemeanor guilty plea with a surrender certificate (<i>please explain below</i>) | | Retirement – Disability Retirement Retirement – Retirement in lieu of Termination Retirement – Under Criminal Investigation Retirement – Service Retirement in Good Standing Death Felony Conviction (<i>please explain below</i>) |
| Explanation, if applicable: _____ _____ _____ | | |

| | | |
|---|--------------------------|----------------|
| ATTESTATION OF LAW ENFORCEMENT AGENCY ADMINISTRATOR | | |
| I attest that the information provided on this form is true and correct and is based on my personal knowledge or inquiry. | | |
| 14. Signature of Law Enforcement Agency Administrator _____ | 15. Name and Title _____ | 16. Date _____ |