



**DAVE YOST**  
OHIO ATTORNEY GENERAL



Ohio Peace Officer Training Commission  
Office 800-346-7682

P.O. Box 309  
London, OH 43140  
[www.OhioAttorneyGeneral.gov](http://www.OhioAttorneyGeneral.gov)

## **Peace Officer Instructor- Special Subject Renewal Application**

Persons certified as special subject instructors shall renew their certificate every three years, at least 60 days and no more than 90 days before expiration of the certificate.

Please include the following information with your application:

- Written evidence from the educational or training facility where the instructor received training documenting that the instructor has successfully completed **within the past three years, a minimum of 12 clock hours of training in topics related to the basic training curriculum.**
- Written evidence from the school commander or administrator that the instructor has **taught in two approved peace officer basic training schools for a minimum total of 12 teaching hours within the past three years.**

Return application with all supporting documentation to:

Email: [OPOTC.Instructors@OhioAttorneyGeneral.gov](mailto:OPOTC.Instructors@OhioAttorneyGeneral.gov)

Ohio Peace Officer Training Commission  
Professional Standards Division  
P.O. Box 309  
London, Ohio 43140



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## Peace Officer Instructor- Special Subject Renewal Application

This form may be emailed to: [OPOTC.Instructors@OhioAttorneyGeneral.gov](mailto:OPOTC.Instructors@OhioAttorneyGeneral.gov)

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

Address \_\_\_\_\_  
No./Street/P.O.Box City County State Zip Code

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

Email \_\_\_\_\_

**\*Email required for receiving Certificate.**

By checking this box, you are authorizing OPOTC to add your Instructor information to the Instructor Directory on OHLEG. You may be contacted in their efforts to find an instructor.

Commander Email \_\_\_\_\_

☐ Check if certificate is also to be emailed to Commander.

Certificate Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

**Attach written evidence of training in topics related to the basic training curriculum, minimum of 12 hours required.**

<u>Educational/Training Facility</u>	<u>Course Title</u>	<u>Date</u>	<u>Total Hours</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Attach written evidence of a minimum of 12 teaching hours in the last 3 years from 2 separately numbered academies.**

<u>School Name &amp; Number</u>	<u>Date(s) Taught</u>	<u>Topic Number</u>	<u>Total Hours</u>
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been investigated, disciplined, or terminated for any matters alleging theft, falsification, dishonesty, violence, immorality, ethical misconduct, and/or sexual misconduct? If yes, include a detailed summary.

Yes No

Have you ever been convicted of a felony, or are you subject to a firearms disability or prohibition? If yes, include a detailed summary.

Yes No

**I declare that the information in this application is true and correct to the best of my knowledge.**

\_\_\_\_\_  
Name of Applicant  
SF320bas

\_\_\_\_\_  
Signature of Applicant  
Effective 07/15/2021

\_\_\_\_\_  
Date  
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