

## Training Waiver vs. Exemption

Sworn personnel from the following titles/agencies are eligible for an *exemption* direct from the NYS Department of State, Division of Licensing Services:

*Current/active police officers are exempt from training and licensing requirements. They do not need a guard registration card to work security.*

1. Separated/retired police officers
2. NYS DOCCS Corrections Officers
3. Bridge and Tunnel Officer, Sergeant or Lieutenant of the TBTA
4. Court Officer or Clerk of the Unified Court System
5. Sheriff, Undersheriff, or Deputy Sheriff of the NYC Sheriff's Office

### **Separated/retired for less than 10 years**

If the personnel from the above titles are separated/retired for less than 10 years, they do not need to attend an 8-hour annual in-service course prior to applying for the exemption and they are exempt from taking the annual in-service course for the first 10 years following their separation/retirement. After 10 years, they must attend an 8-hour annual in-service prior to applying.

To apply for an armed guard exemption, they must show successful firearms qualification within 12 months of their exemption request. This can be satisfied by supplying a letter from their department showing successful qualification during their last year of active service or successful completion of an 8-hour armed annual at an approved armed guard training school. Department of State and DCJS do not accept LEOSA (HR 218) qualification as acceptable proof.

THE TEN YEAR 8-HOUR ANNUAL IN-SERVICE EXEMPTION DOES NOT EXTEND TO THE 8-HOUR ARMED ANNUAL. ALL ARMED GUARDS, REGARDLESS OF BACKGROUND, MUST SUCCESSFULLY COMPLETE THE ARMED ANNUAL AS OUTLINED IN THE SECURITY GUARD ACT.

## **Waivers**

A training waiver is available to sworn peace officers not specifically listed as exemption eligible. To obtain a waiver a person must complete the training waiver application form

A peace officer is eligible for a training waiver any time after completing the Basic Course for Peace Officers or for 4 years after their separation/retirement.

If a peace officer wants to receive a waiver of the 47-hour firearms training course, they must be an armed peace officer, completed the initial firearms course, and have a minimum of 18 months in service as an armed peace officer. They also must show successful firearms qualification within 12 months of their waiver application. Successful completion can be shown in the same manner as an exemption candidate.

Part time peace officers are not eligible for a training waiver. The applicant must appear as a full-time peace officer on the DCJS registry.

Applicants granted a training waiver will receive a letter from DCJS listing the courses for which they have been waived. A copy of this letter must be sent to the Department of State with the registration card application paperwork.

### **8 hour Armed Annual Waiver**

Current, active armed peace officers can apply for a waiver of the armed annual requirement. This waiver is obtained directly from the Department of State, Division of Licensing Services. An armed peace officer who also holds an armed guard registration card needs to mail the Division of Licensing Services a letter requesting the waiver. The letter must be accompanied by a second letter from the peace officer employer stating that the applicant is a current, active armed peace officer who attends annual firearms qualification as part of their armed peace officer employment. Once the peace officer leaves active service, they must begin completing armed annuals at an approved school. THIS WAIVER MUST BE MAILED TO THE DIVISION OF LICENSING SERVICES.

New York State Division of Criminal Justice Services  
**WAIVER OF PEACE OFFICER TRAINING REQUIREMENT**  
(Executive Law §841)

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THIS FORM IS USED BY PERSONS WHO HAVE RECEIVED PRIOR CERTIFICATION OF POLICE BASIC TRAINING FROM THE STATE, A COUNTY, CITY, TOWN, VILLAGE, MUNICIPAL AUTHORITY, OR POLICE DISTRICT OF NEW YORK STATE WHILE FORMERLY EMPLOYED AS A POLICE OFFICER. FORMS PRESENTED FOR FILING MUST CONTAIN ORIGINAL SIGNATURES. ALTHOUGH THE BLANK FORM MAY BE DUPLICATED, PHOTOCOPIES OF COMPLETED FORMS, OR FORMS WITH PHOTOCOPIED SIGNATURES WILL NOT BE ACCEPTED.

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Executive Law §841 authorizes the commissioner of the Division of Criminal Justice Services to certify police and peace officer basic training, and to issue equivalency certificates when appropriate.

**SECTION I: APPLICANT INFORMATION**

This section must be completed by the chief executive officer of the applicant's current employer. Only individuals appointed to positions defined in Criminal Procedure Law Sections 2.10 or 2.16 are eligible to apply for the waiver.

Type or print legibly, the applicant's last name, first name, middle initial, date of birth, social security number, and gender. Enter the name of the current employer, the rank and/or title of the applicant, and the date of initial appointment. While the Social Security Number is not required, the accuracy of linking future training records with appointment information cannot be assured without it. Carefully read the certification. Sign and date in the area provided. With the exception of Social Security Number, the information in Section I is required. Incomplete submissions will not be processed.

**SECTION II: PREVIOUS POLICE OR PEACE OFFICER EXPERIENCE**

Type or print legibly, the agency name, telephone, complete mailing address, title or rank of the applicant, type of appointment (full or part-time), the date of appointment and the date of separation from service (if any). Repeat for each police employer. Incomplete submissions will not be processed.

Applicants must possess a valid certificate of police basic training to be eligible for the waiver. The provisions of General Municipal Law §209-q regarding the validity of police officer basic training certification applies to former police officers seeking appointment as peace officers, regardless of past employment.

**SECTION - III: POLICE BASIC TRAINING**

Type or print legibly, the name, telephone, complete mailing address of the agency or academy that provided the police basic training course. Include the name of the course director and the dates of the course. Incomplete submissions will not be processed. **A photocopy of the certificate of completion must be attached.**

**MAILING INSTRUCTIONS:**

Mail completed forms to:

NYS Division of Criminal Justice Services  
Alfred E. Smith State Office Building  
Office of Public Safety – Records Unit  
80 South Swan St., 3rd Floor  
Albany, NY 12210

**QUESTIONS:**

If you have any questions regarding this form, call (518) 457-2667 for assistance.

New York State Division of Criminal Justice Services  
**WAIVER OF PEACE OFFICER TRAINING REQUIREMENT**  
 (Executive Law §841)

**SECTION I – APPLICANT INFORMATION** (To be completed by the chief law enforcement officer)

Applicant Last Name	Applicant First Name	MI	Date of Birth	Social Security Number*	Gender <input type="checkbox"/> M <input type="checkbox"/> F
Current Employer		Rank or Title		Date of Appointment	
<p><i>I hereby certify the above named individual has been appointed as a sworn peace officer with this agency. I have determined that he/she has completed the basic training course required by and while employed by the state, a city, town, village, municipal authority, or police district in the state of New York. Accordingly, I request that the Division of Criminal Justice Services records be adjusted to reflect that this officer has met the basic training requirements for appointment of police officers as set forth in section 2.30 of the Criminal Procedure Law, since this training meets or exceeds Municipal Police Training Council requirements for basic training for peace officers. I understand that the information in Section I is part of a written statement that will be presented to the Division of Criminal Justice Services for filing, and I certify that it is true to the best of my knowledge and belief.</i></p>					
Signature of Chief Executive Officer				Date	

\*Pursuant to the New York State Personal Privacy Protection Law, DCJS is authorized to collect personal identifying information as part of a public safety agency record. Personal identifying information on this form shall not be revealed, released, transferred, disseminated or otherwise communicated orally, in writing, or by electronic means other than to the registrant. Disclosure of personal identifying information is voluntary. Refusal to provide personal identifying information shall not result in the denial of any right, benefit, or privilege.

**SECTION II – PREVIOUS POLICE OFFICER EXPERIENCE**

Identify previous police or peace officer employment. If more space is needed, attach a separate sheet.			
Name of Previous Law Enforcement Employer			Telephone
Address		City, State, ZIP	
Rank or Position	Type of Appointment <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Date of appointment	Date of separation

**SECTION III – POLICE BASIC TRAINING**

Identify prior police basic training. A copy of the certificate of completion for police basic training issued by the New York State Police, the New York City Police Department or the Municipal Police Training Council must be attached.		
Name of Law Enforcement Agency or Academy		Telephone
Address		City, State, ZIP
Course Director Name	Course start date	Course end date

**DCJS USE ONLY**

Training Verified By:	Approved By:	Date:	School ID:
Employer Code:	Rank Code:	Course Code: <b>988</b>	



# Division of Licensing Services

New York State  
**Department of State**  
**Division of Licensing Services**  
 P.O. Box 22052  
 Albany, NY 12201-2052  
 Customer Service: (518) 474-7569  
 www.dos.ny.gov

## Employee Statement and Security Guard Application

**FEE \$36**

### APPLICANT INFORMATION

Please TYPE or PRINT all responses in ink.

**APPLICATION AS** (Check only ONE):

**Security Guard**
**Armed Security Guard**
**Applicant's Name:**

LAST NAME

FIRST NAME

MIDDLE NAME

HOME ADDRESS (Required – P.O. Box may be added to ensure delivery)

APT/UNIT/PO BOX

CITY

STATE

ZIP+4

COUNTY (Enter only if in New York State)

APPLICANT'S PHONE NUMBER

E-MAIL ADDRESS

**Social Security Number:**

(\*Required – See Privacy Notification)

**Birth Date:**

(Must be at least 18 years old to apply)

**NYS DMV ID Number:**

(\*Required – See Applicant Affirmation)

### BACKGROUND QUESTIONS

Answer the following questions by checking the appropriate box.

- |   |                            |
|---|----------------------------|
| <p><b>1. Are you an active or retired peace officer? IF "YES,"</b><br/>           → Please read the attached Security Guard Training Advisory.<br/>           → <b>IF</b> you qualify for an exemption, you must submit the documentation described in the Advisory.<br/>           If you <b>DO NOT</b> qualify, you must submit training certificates.</p>  | <p>ACTIVE      RETIRED</p> |
| <p><b>2. Are you an active or retired police officer? IF "YES,"</b><br/>           → Please read the attached Security Guard Training Advisory.<br/>           → <b>IF</b> you qualify for an exemption, you must submit the documentation described in the Advisory.<br/>           If you <b>DO NOT</b> qualify, you must submit training certificates.</p>   | <p>ACTIVE      RETIRED</p> |
| <p><b>3. Has any license or permit issued to you or a company in which you are or were a principal in New York State or elsewhere ever been revoked, suspended or denied?</b><br/>           → <b>IF "YES,"</b> you must submit an explanation.</p>   | <p>YES      NO</p>         |
| <p><b>4. Have you ever been discharged from a correctional or law enforcement agency for incompetence or misconduct as determined by a court of competent jurisdiction, administrative hearing officer, administrative law judge, arbiter, arbitration panel or other duly constituted tribunal, or resigned from such an agency while charged with misconduct or incompetence?</b><br/>           → <b>IF "YES,"</b> you must submit an explanation or request a waiver.</p> | <p>YES      NO</p>         |
| <p><b>5. Have you ever applied in this state for a registration/license as a security guard?</b><br/>           → <b>IF "YES,"</b> please provide the license number.<br/>           → <b>IF "YES,"</b> you do not need to re-take the 8-hour pre-assignment training course.</p>   | <p>YES      NO</p>         |

**CHILD SUPPORT STATEMENT**

By signing this application, I certify that as of the date of this application, I am not under an obligation to pay child support OR if I am under an obligation to pay child support, I am not four or more months in arrears in the payment of child support, or I am making payments by income execution or by court agreed payment or repayment plan or by a plan agreed to by the parties or my child support obligation is the subject of a pending court proceeding, or I am receiving public assistance or supplemental security income.

**CRIMINAL HISTORY**

The Department of State will be receiving and reviewing information on any prior criminal arrests or convictions. If you have pending criminal charges or a prior conviction, please provide a statement explaining same and copies of any records received from the criminal court.

**A completed application must include:** (Use this checklist to make sure you have included/completed all requirements.)

- The completed, signed application;
- Receipt that provides proof of electronic fingerprinting by an approved vendor;
- \$36.00 non-refundable application fee payable to the NYS Department of State;
- A copy of the 8-hour pre-assignment training certificate;
- Any additional documentation requested in response to specific questions on the application form;
- Notice of Employment section must be completed by your employer if employment will commence with filing of your application;
- If applying for an armed security guard registration, a course completion certificate for 47 hours of firearms training, or a copy of the waiver issued by the Division of Criminal Justice Services (if waived – please see Security Guard Training Advisory)

**Note:** Security guard employers should maintain one copy of each item listed above in personnel files for each of their guards.

**APPLICANT AFFIRMATION**

I affirm, under the penalties of perjury, that the statements made in this application are true and correct. I further affirm that I have read and understand the provisions of Article 7A of the General Business Law and the rules and regulations promulgated thereunder.

In addition, I hereby authorize the NYS Department of State and NYS Department of Motor Vehicles to produce an ID card bearing my DMV photo. I understand that DOS and DMV will use my DMV photo to produce all subsequent ID cards for as long as I maintain my license with the Department of State.

**X** \_\_\_\_\_  
Applicant's Signature Date Signed

Print Name:

**NOTICE OF EMPLOYMENT**

If employment will commence with the filing of your application, this section MUST be completed by your employer.

DATE OF HIRE:

TRANSACTION NUMBER:

TRANSACTION DATE:

GUARD'S NAME:

GUARD'S SOCIAL SECURITY NUMBER:

EMPLOYER'S UID:

EMPLOYER'S BUSINESS NAME:

I, (Please Print) \_\_\_\_\_, swear and affirm that I am the representative for the company identified as the employer and that I have verified the statements made by this employee and determined that these statements are true and correct to the best of my ability. I further attest that based on my verification of these statements, I find that the employee listed hereon is qualified for employment under the provisions of Articles 7 and 7-A of the General Business Law.

**X** \_\_\_\_\_  
Employer's Signature Date Signed



# FINGERPRINTING LOCATIONS

All security guards must be fingerprinted for the Department of State via an Identogo vendor. The fee for fingerprinting is **approximately \$100.00**, paid by check, money order, or credit card. **Walk-ins are not accepted, you must make an appointment.**

Appointments can be made on-line at [uenroll.identogo.com](http://uenroll.identogo.com)

Use service code **1545R1** for Security Guards, Unarmed or Armed

**\*\*\*YOU MUST PROVIDE 1 FORM OF APPROVED PHOTO ID AT YOUR APPOINTMENT\*\*\***

**(eg. Driver’s license, Learner’s Permit, State ID card, US Passport, US Military ID)**

**\*\*\*KEEP THE RECEIPTS THAT ARE PROVIDED AT YOUR FINGERPRINTING APPOINTMENT!**

**A COPY MUST BE INCLUDED WITH YOUR GUARD APPLICATION\*\*\***

Fingerprinting for the NYS Department of State must be done through an Identogo approved vendor. See the locations and hours below:

## LONG ISLAND

### SUFFOLK COUNTY

<b>Kings Park</b>	Shipping Center-PrintScan 21 Pulaski Road Kings Park Kings Park, NY 11754	<b>Monday &amp; Friday 9AM-5PM Tuesday &amp; Thursday 9AM-6PM Saturday 10AM-4PM</b>
<b>East Moriches</b>	IGHL 60 Montauk Highway East Moriches, NY 11940	<b>Monday, Tuesday, Wednesday, &amp; Friday: 9AM-12PM, 1PM-4PM</b>
<b>Riverhead</b>	Comfort Keepers 31 Main Road, Suite 9 Riverhead, NY 11901	<b>Monday 2PM-4PM Tues, Wed, Thurs: 10AM-1PM, 2PM-5PM Friday 10AM-1PM, 2PM-4PM</b>
<b>Sag Harbor</b>	East End Consulting 3330 Noyac Road Building D Sag Harbor, NY 11963-1931	<b>Monday 11:30AM-3:30PM</b>

### NASSAU COUNTY

<b>Hicksville</b>	PrintScan Quality Plaza 958 South Broadway Hicksville, NY 11801	<b>Monday, Tuesday, Thursday, &amp; Friday 9AM-5PM Wednesday 9AM-6PM Saturday 10AM-4PM</b>
<b>Hempstead</b>	236 Fulton Avenue Suite 200 Hempstead, NY 11550	<b>Monday-Friday 9AM-1PM, 1:30PM-5:30PM Every Other Saturday 9AM-2PM</b>



**QUEENS**

<b>Woodside</b>	3905 63 <sup>rd</sup> Street Woodside, NY 11377	<b>Monday-Thursday</b> 9AM-7PM <b>Friday</b> 9AM-9PM <b>Saturday</b> 10AM-7PM
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**BROOKLYN**

<b>Flatbush</b>	Metropolitan Special Services 1772 Flatbush Avenue Brooklyn, NY 11210	<b>Monday, Wednesday, &amp; Friday</b> 8:30AM-6PM <b>Tuesday &amp; Thursday</b> 8:30AM-8PM <b>Every Other Saturday</b> 10AM-6PM
<b>Fulton Street</b>	2174 Fulton Street Brooklyn, NY 11233	<b>Monday-Thursday</b> 9AM-6PM <b>Friday</b> 9AM-7PM
<b>Barclays Center</b>	Barclays Center 620 Atlantic Avenue Brooklyn, NY 11217-2004	<b>Monday-Friday</b> 9AM-1PM, 1:30PM-5:30PM

**NEW YORK**

**MANHATTAN**

<b>Park Place</b>	Global Document Expeditors 22 Park Place, 4 <sup>th</sup> Floor New York, NY 10007	<b>Monday</b> 9AM-6PM <b>Tuesday &amp; Friday</b> 9AM-5PM <b>Wednesday</b> 9AM-7PM <b>Thursday</b> 9AM-5:30PM <b>3<sup>rd</sup> Saturdays</b> 9AM-1PM
<b>Midtown- 35<sup>th</sup> Street</b>	247 West 35 <sup>th</sup> Street Room 201 New York, NY 10001-1927	<b>Monday-Friday</b> 9AM-5:30PM <b>Saturday</b> 10AM-4PM
<b>Times Square-Broadway</b>	Securitas 1412 Broadway 17 <sup>th</sup> Floor New York, NY 10018	<b>Monday-Friday:</b> 9AM-1PM, 2PM-4PM

**BRONX**

<b>South Bronx</b>	Rio Consulting 349 East 149 <sup>th</sup> Street Suite 605 Bronx, NY 10451	<b>Monday, Tuesday, Thursday</b> 9AM-5PM <b>Wednesday</b> 9AM-6PM <b>Friday</b> 9AM-1PM, 2PM-5PM <b>Every Other Saturday</b> 10AM-2PM
<b>Morris Park</b>	2114 Williamsbridge Road Suite 114 Lower Level Bronx, NY 10461	<b>Monday-Friday</b> 9:30AM-6PM <b>Saturday</b> 10AM-3PM