

Attachment D

State of California – Department of Justice

CERTIFICATE APPLICATION – RESERVE PEACE OFFICERPOST 2-256 (10/2010) – [See Instructions](#)Commission on Peace Officer
Standards and Training (POST)
860 Stillwater Road, Suite 100
West Sacramento, CA 95605-1630**POST USE ONLY**

INFORMATION PRIVACY ACT: Pursuant to the Federal Privacy Act (Public Law 93-579) and the Information Practices Act (IPA) of 1977 (Civil Code Sections 1798, et seq.), notice is hereby given for the request of personal information. Failure to provide any part of the requested information may delay processing of this application or result in an incomplete record. No disclosure of personal information will be made unless permissible under Article 6, Section 1798.24 of the IPA of 1977. Each individual for whom personal information is collected has the right to inspect that information in any record maintained by POST. Inquiries may be directed to the POST Information Practices Act Coordinator at the address listed above.

SECTION 1. IDENTIFICATION AND CURRENT EMPLOYMENT

1. APPLICANT NAME (LAST, FIRST, MIDDLE)	2. BIRTH DATE	3. POST ID (OR SOCIAL SECURITY NUMBER)
		- SSN: - -
4. CURRENT EMPLOYING AGENCY		5. RANK/LEVEL AND DATE APPOINTED
		Date:

SECTION 2. TRAINING

NOTE: All training and education statements **MUST** be supported by **NON-RETURNABLE** copies of transcripts, degrees, diplomas, or other verifying documents. *These copies must be included with this application.*

6. TITLE OF BASIC TRAINING COURSE	7. ACADEMY / SCHOOL WHERE TRAINING WAS COMPLETED	8. HRS COMPLETED	9. DATE COMPLETED
1)			
2)			
3)			
4)			
5)			
6)			

SECTION 3. ATTESTATION

10. APPLICANT SIGNATURE	11. DEPARTMENT/AGENCY COORDINATOR	
I attest that I have read and subscribe to the Law Enforcement Code of Ethics and that all of the information contained in this application is true and correct.	Print Full Name:	
	Phone: ()	Fax: ()
	Email:	
► Date:		
12. DEPARTMENT HEAD / AUTHORIZED DESIGNEE SIGNATURE		

Recommendation to Award Certificate: The above applicant has satisfactorily completed the training and service required for this certificate in POST Regulation [1011\(a\)\(12\)](#).

Date:

Print Name:

POST USE ONLY

TYPE	CERT NUMBER	ISSUE DATE	TRAINING FACILITY	EVALUATED BY	REVIEWED BY
R					

Comments:

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CERTIFICATE APPLICATION – RESERVE PEACE OFFICER

POST 2-256 (Rev 12/2012)

INSTRUCTIONS

SECTION 1: IDENTIFICATION AND CURRENT EMPLOYMENT

Box 1 *Applicant Name*

Box 2 *Birth Date*

Box 3 *POST ID (or Social Security Number)* – Enter your POST identification code. This unique identifier will be used solely for processing POST records. (You may enter your SSN if you do not have a POST ID.)

Box 4 *Current Employing Agency* – Enter the full name of the agency where the applicant is currently appointed as a Level I Reserve Peace Officer.

Box 5 *Rank Level and Date Appointed*

SECTION 2: TRAINING

Box 6 *Title of Basic Training Course* – Enter the title(s) of the basic training courses completed by the applicant. Enter “**BCW**” if the applicant met the basic training requirement through the Basic Course Waiver process.

Box 7 *Academy / School Where Training Was Completed* – Enter the full name(s) of the training facility(s) where the applicant completed basic training, if applicable.

Box 8 *Hrs Completed* – Enter the total number of hours of basic training **completed** by the applicant.

Box 9 *Date Completed* – Enter the actual date the applicant completed basic training.

SECTION 3: ATTESTATION

Box 10 *Applicant Signature*

Box 11 *Department/Agency Coordinator* – Enter the name and contact information of the coordinator for POST (please key online or print legibly).

Box 12 *Department Head/Authorized Designee Signature* – The department head or designee **must sign and date** the application to recommend awarding the certificate(s), and the signature name must be clearly printed.

NOTE: If a designee is authorized to sign the application(s), a POST *Certificate of Authorization* form (Form 2-270) must be on file with POST.

NEED help?

Please go to www.post.ca.gov and click on **Forms** or **Training**, or *contact* POST at 916 227-4253.

For additional POST certificate applications, please submit the required form:

- ☐ **Form 2-116 – Records Supervisor**
- ☐ **Form 2-117 – Peace Office/Other**
- ☐ **Form 2-289 – Public Safety Dispatcher**

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