



**COMMONWEALTH OF VIRGINIA**  
**Department of Criminal Justice Services**

P.O. Box 1300 • Richmond, VA 23218  
Phone: (804) 786-4700 • Fax: (804) 786-6344 [www.dcjs.virginia.gov/pss](http://www.dcjs.virginia.gov/pss)

Status Hotline  
(804) 786-1132  
1-877-9STATUS

**Private Security Services –**  
**GENERAL INSTRUCTOR ENTRY LEVEL TRAINING ENROLLMENT – FEE \$300.00**

**IMPORTANT INFORMATION**

- The application is for ENTRY level training enrollment. It does not process certification.
- Third Party Documentation verifying the types and dates of experience must be attached to this application. To be eligible, the experience must be either (see **6 VAC 20-171-100** of the Regulations Relating to Private Security):
  - Three (3)** years managerial/supervisory experience in a private security services business, a federal, state, or local law enforcement agency or in related field
  - OR**
  - Five (5)** years general experience in private security or a related field
  - OR**
  - One (1)** year experience as an instructor/teacher at an accredited educational institution or agency in the subject matter for which certification is requested, or in a related field

**Training Date / Location Requested – Accommodations**

Date:

Location:

Do you require disability accommodations?  No  Yes\* \*If **YES**, please specify:

**Applicant Information**

SSN or DCJS ID Number:  
99-

Last Name:

First Name:

MI:

Mailing Address (Street/Apt.#):

City, State, Zip:

Email Address:

Home Phone: ( )

Business Phone: ( )

Fax: ( )

**Employment Information**

Business /School Name :

DCJS ID Number:

**Affirmation**

I, the undersigned, certify that all information contained on this application is true and correct to the best of my knowledge and I have not omitted any pertinent information. I understand that any misrepresentation, falsification or omission of pertinent information may be cause for denial and may result in criminal charges. I understand that I am responsible for maintaining full compliance with *Virginia Code* Sections 9.1-138 through 9.1-150 and the Regulations Relating to Private Security Services 6 VAC 20-171.

Signature Required: \_\_\_\_\_

Date: \_\_\_\_\_  
mm/dd/yy

***All fees are non-refundable. Applications received without payment will be returned.***

Submit a check or money order payable to the TREASURER OF VIRGINIA,  
or pay by credit card using the [Credit Card form](http://www.dcjs.virginia.gov/forms/privatesecurity/pss_cc.pdf) available at [www.dcjs.virginia.gov/forms/privatesecurity/pss\\_cc.pdf](http://www.dcjs.virginia.gov/forms/privatesecurity/pss_cc.pdf)  
— this form must be included with your application package when paying by credit card.