



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

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

Private Security Services – TRAINING SCHOOL STAFF CHANGE FORM

IMPORTANT INFORMATION

Please use this form to add and/or delete an instructor or designate an assistant school director for a training school.
This form may be mailed to the above address or faxed to 804-786-6344.

School Name:	School Certification Number: 88 –
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ADD Certified Instructor(s) or Assistant School Director to the training school records:

Instructor Name	DCJS ID #	Hire Date	Instructor Signature (required)
Is this person designated as an Assistant School Director?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Instructor Name	DCJS ID #	Hire Date	Instructor Signature (required)
Is this person designated as an Assistant School Director?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Instructor Name	DCJS ID #	Hire Date	Instructor Signature (required)
Is this person designated as an Assistant School Director?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Instructor Name	DCJS ID #	Hire Date	Instructor Signature (required)
Is this person designated as an Assistant School Director?			<input type="checkbox"/> Yes <input type="checkbox"/> No

REMOVE Certified Instructor(s) from the training school records:

Instructor Name	DCJS ID #	Termination Date

Affirmation

As the designated school director for the above training school, I understand that training conducted by instructors not certified in the specific category is considered null and void and will not be accepted by DCJS. I further understand that I am responsible for maintaining documentation of instructor qualification/certification for each instructor utilized by the training school.

School Director: _____ Date: _____
Signature

School Director: _____
Print Name