

**OUT OF STATE OFFICERS ELIGIBILITY REQUIREMENTS PLEASE  
READ ENTIRE PACKET**

*After completion of some basic training, TCOLE Rule 219.2 allows eligible applicants to take the State Licensing Exam based on their prior service as Out of State Officers. This preliminary application will help us determine if you have the minimum required training and service time to be eligible for reciprocity under TCOLE Rule 219.2. Further instructions will be sent to those who qualify.*

***The length of previous service time and the date of your last active appointment will determine how much basic training you must complete to earn an endorsement to take the State Licensing Exam. Do not make career or life-changing decisions prior to completing the entire application process. Incomplete or incorrect forms and illegible documents will be automatically rejected and returned to the applicant.***

It is highly recommended that before submitting this preliminary application you review the Minimum Standards for Initial Licensure (Rule 217.1), which is posted under “Help and Resources” on our website at: [www.tcole.texas.gov](http://www.tcole.texas.gov) All applicants (regardless of past service) must meet every prerequisite listed there.

One of those mandatory requirements is to submit your fingerprints through “Fingerprint Application Services of Texas (FAST). A detailed instruction form is included below. If you have additional questions, call (512) 936-7700. **If you do not have a FAST location in your area, please call our office to have a FAST application plus hard cards mailed to you.**

**PLEASE READ THE FOLLOWING CAREFULLY**

**SERVICE TIME AND COURSE REQUIREMENTS:** Do not start any of the training listed below prior to your application being approved by TCOLE. Training completed prior to approval will not be credited.

<b>Years of full-time service</b>	<b>Courses required</b>
If you meet <b>one</b> of the following  Less than 10 years of full-time service AND Less than 10 years from last full-time appointment OR More than 10 years of full-time service AND More than 10 years from last full-time appointment OR More than 10 years of full-time service AND Less than 10 years from last full-time appointment	#1018 – Texas Supplemental Peace Officer Course #1850 – CIT #4065 – Canine Encounters #7887 – Interacting with drivers deaf or hard of hearing #3270 – Human Trafficking #1849 – De-escalation Techniques #30418 – Civilian Interaction Training

**Please note, if you have less than 10 years of full-time service AND more than 10 years from last full-time appointment (TCOLE uses the END date of your last full-time appointment), you must attend an in-person Basic Peace Officer academy in Texas.**

If your application is approved, you will receive a confirmation email and you can begin to complete the above courses.

Once approved, you will have 180 days to complete all coursework. If the time expires, you will be required to begin the application process again, including the FAST process.

Failure to pass after the last remaining attempt will require you to retake a basic licensing course before being issued another endorsement. Failure to complete all attempts in the allotted time will require you to complete the basic licensing course to receive another endorsement. Please refer to Rule 219.1(e).

**Individuals from other U.S. states must:**

1. provide proof of successful completion of a state POST-approved (or state licensing authority) basic police officer training academy with equivalent course topics and hours of training at the time of initial certification or licensure;
2. have honorably served (employed, benefits eligible) as a sworn, full-time paid peace officer for 2 continuous years. Only state POST approved service time will be recognized. Service time applied to this section must have been obtained following completion of a state POST approved basic training course;
3. be subject to continued employment or eligible for re-hire (excluding retirement);
4. the applicant's license or certificate must never have been, nor currently be in the process of being, surrendered, suspended, or revoked; and
5. have a copy of all their military discharge(s) (DD-214) (if applicable). Individual has never received a dishonorable discharge.

**Required Documents to Accompany the Application to Determine Eligibility:**

1. A copy of the basic training certificate with hours listed. If hours are not listed on the certificate, documentation of hours completed must accompany the certificate (Reserve, part time, or auxiliary training is not accepted);
2. A copy of the police officer license or certificate issued by the state POST;
3. A statement from the state POST revealing any disciplinary action(s) that may have been taken against any license or certificate issued by that agency or any pending action; or that no disciplinary action has been taken at any time on your license or certification;
4. A statement from your employing agency(s) stating **full time service** as a peace officer. **Exact service dates** are required. (Reserve or auxiliary peace officer training is not accepted; probationary officer time prior to completion of an approved basic police officer training academy is not accepted);
5. A copy of your valid state-issued driver's license; and
6. A copy of all your military discharge(s) (DD-214) (if applicable).

The Commission may request that applicants submit a copy of the Basic and Advanced Training Curriculum for equivalency evaluation and final approval.

If you have less than 10 years of cumulative full-time service, use the Chart below, with your date of academy graduation, to determine eligibility based on basic peace officer academy length.

<b>Year Graduated from Academy</b>	<b>Texas Hours</b>	<b>Minimum Accepted Hours (80% of Texas Hours)</b>
09/01/1970- 12/31/1972	140	112
01/01/1973- 12/31/1980	240	192
01/01/1981- 08/31/1985	320	256
09/01/1985- 08/31/1994	400	320
09/01/1994- 12/31/2001	560	448
01/01/2002- 12/31/2004	576	461
01/01/2005- 12/31/2012	618	494
01/01/2013- 03/31/2020	643	514
04/01/2020- 02/17/2022	696	556
02/17/2022-current	720	576



## FINGER PRINT INSTRUCTION FORM

### TEXAS COMMISSION ON LAW ENFORCEMENT

(TCOLE/Service Code 11G4J8)

1. Schedule an appointment to be electronically fingerprinted by MorphoTrust USA at one of their IdentoGo enrollment centers.
  - Internet based scheduling is the quickest and most convenient way to obtain a fingerprint appointment.
    - a. **You may begin the process now by simply clicking on this link: <https://identogo.com>**
    - b. Click – Texas
    - c. Digital Fingerprinting
    - d. Service Code: **11G4J8**
    - e. Schedule your appointment accordingly.
    - f. Academy Number: **LE-453007**
  - If you prefer to schedule over the telephone, you must:
    - a. Have your Service Code ready (**11G4J8**), then call **888.467.2080**;
    - b. MorphoTrust will prompt you for the Service Code (**11G4J8**);
    - c. Schedule your appointment accordingly.
2. Arrive at your scheduled appointment with your photo identification and fee (see IdentoGo for fee).
  - If you plan on bringing a form of identification other than a valid (unexpired) TX Driver License, please refer to the Department of Public Safety's acceptable document types here: <http://www.l1enrollment.com/state/forms/tx/55fc619a7f7aa.doc>
  - MorphoTrust accepts Visa/MasterCard/Discover/AmericanExpress, business checks, money orders and coupon codes (employer accounts) at the time of service.
  - Please note that personal checks and cash are **not accepted**.
3. Your fingerprints will be submitted electronically to DPS and the FBI. You will not receive a printed fingerprint card.
4. At the conclusion of your appointment, the MorphoTrust enrollment agent will provide you with an IdentoGo receipt stating that you were fingerprinted.
  - Do not throw away the receipt;
  - You may check status on your submission by clicking on this link: <https://uenroll.identogo.com/workflows/11G4J8> and then;
  - Click "**Check Status**"

Fingerprints provided for this application shall be used to check criminal history records of the Texas Department of Public Safety and the Federal Bureau of Investigation, in accordance with applicable statutes.

**Mail this form with all required documents to:**

Texas Commission on Law Enforcement  
6330 E. Hwy. 290, Suite 200  
Austin, TX 78723-1035  
[www.tcole.texas.gov](http://www.tcole.texas.gov)

**Out of State Officers Eligibility Form**

THIS IS NOT AN APPLICATION

This form is to establish eligibility under reciprocity. If approved, you will be emailed an application allowing you to apply to take the peace officer licensing exam. Please call (512) 936-7700 with any questions.

**Incomplete forms or documentation will be returned. Please allow at least 2-4 weeks for processing.  
Please type or print all information.**

Date of application: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_ Suffix: \_\_\_\_\_

Drivers' License Number: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ U. S. Citizen \_\_\_\_ Yes \_\_\_\_ No Education: \_\_\_\_ High School Diploma \_\_\_\_ GED

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

(5112) Out of State Officers: Documents must bear original certification seals or stamps. Detailed documentation requirements are listed in the eligibility form instructions.

1. \_\_\_ A copy of the basic training certificate, with hours listed
2. \_\_\_ A statement from the employing agency revealing any disciplinary action(s) that may have been taken against any license or certificate issued by that agency or any pending action; or that no disciplinary action has been taken at any time on your license or certificate.
3. \_\_\_ A copy of the Peace Officer license or credentials
4. \_\_\_ A statement from your employing agency(s) stating full-time service as a peace officer
5. \_\_\_ A copy of your valid, state-issued driver's license
6. \_\_\_ A copy of all your military discharge(s) (DD-214), if applicable
7. \_\_\_ A copy of your "Release of Information" form

Upon signing this document, I understand that I will have to meet the requirements of Commission Rule §217.1 for licensure. I have not been convicted of or placed on deferred adjudication for any Class B Misdemeanor or above, nor do I currently have pending criminal charges against me. I am fully aware that this application is a government document, and, under penalties of perjury, I declare the foregoing information to be true and correct.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Sworn to and subscribed before me, this the \_\_\_\_\_ day of \_\_\_\_\_

My commission expires \_\_\_\_/\_\_\_\_/\_\_\_\_

Notary public in and for State of \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Notary

Notary Seal or Stamp

\_\_\_\_\_  
Notary Signature

**PID ASSIGNMENT (C-1)**  
 Completion of all fields required.

**INDIVIDUAL INFORMATION**

1. Social Security Number	2. First Name	3. M.I.	4. Last Name	5. Suffix (Jr., etc .)
6. Race / Ethnicity <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Multicultural <input type="checkbox"/> White			7. Date of Birth /    /	8. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
10. Home Mailing Address		11. City		12. State
14. Height		15. Weight	16. Hair Color	17. Eye Color
18. U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	19. Phone Number (include area code)		20. Email	
21. Select One Completed: <input type="checkbox"/> High School <input type="checkbox"/> GED				

This form is to be submitted only for the express purpose of having a personal identification number (PID) assigned by TCOLE to the above-named individual therein creating a TCOLE record and allowing training to be reported for that individual.

**Agency administrator or training coordinator check appropriate box for their student or employee.**

- Applying for entry into a basic licensing course.
- Applicant has read and received a copy of §217.1 Minimum Standards for Initial Licensure.

\_\_\_\_\_  
 Signature of Applicant Date

- Future appointment as a Telecommunicator, Temporary or Licensed Future appointment
- as a County or Contract Jailer, Temporary or Licensed Future Appointment as a
- Probation Officer, Juvenile or Adult
- Ability to track training hours
- Ability to utilize a TCOLE system as an authorized user for this agency

TCOLE agency / training provider number \_\_\_\_\_ and Name \_\_\_\_\_

\_\_\_\_\_  
 Agency Administrator or Training Coordinator (Type or Print)    Signature Date

**Individuals not associated with a training provider or agency check below.**

- Applying for instructor certificate for Applying
- Retired Federal Firearms ID
- Applying for consideration of prior out-of-state, federal, military, special forces or TDCJ training.

\_\_\_\_\_  
 Signature of Applicant Date

(Name of Law Enforcement Agency)

**AUTHORITY TO RELEASE INFORMATION**

TO WHOM IT MAY CONCERN:

I hereby authorize the \_\_\_\_\_ and its authorized representatives bearing this release, or a copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment, military, credit, education or medical records, including not limited to academic, achievement, attendance, athletic, personal history, and disciplinary records, medical records, and credit records.

I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for official use. Consent is granted to all parties to furnish such information, as described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, or retail business establishment including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or attempt to comply with it.

I am furnishing my Social Security Account Number on a voluntary basis with the understanding such is not required by any law or regulation. I have been advised that all parties will utilize this number only to facilitate the location of employment, military, credit, and educational records concerning me in connection with this application. Should there be any question as to the validity of this release, you may contact me as indicated below:

Applicant's Printed Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Applicant's Notarized Signature: \_\_\_\_\_

Sworn to and signed before me, on this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, in and for \_\_\_\_\_ county, in the state of \_\_\_\_\_.

Signature of Notary Public: \_\_\_\_\_

NOTARY SEAL

Printed Name of Notary Public: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_