



Commonwealth of Virginia
Virginia Department of Criminal Justice Services
Campus Security Officer (CSO)

Application for Re-Certification

To designated Virginia Campus Security Officer Point of Contact (POC): In order to conform to Virginia State Regulation 6 VAC 20-270, applications for re-certification of Campus Security Officers (CSO) must be received by the Virginia Department of Criminal Justice Services (DCJS) at least thirty (30) days before certification expiration. It is the responsibility of the campus security officer's employer to ensure the re-certification applications are filed with the Department.

Applicants for re-certification must complete sixteen (16) hours of in-service training during each two-year period after initial certification. The in-service training must be directly related to the duties of the campus security officer, to include a legal update and other relevant topics approved by DCJS.

CSO Name (First, MI, Last): _____

CSO Email Address: _____

CSO Driver's License No.: _____ State of License: _____

Employer: _____

Date of Hire: _____ Date of Basic Certification Training: _____

The Campus Security Officer indicated above has completed 16 hours of campus security related training, including legal update, within the 2-year period following date of certification/re-certification. Course content of said training has met with the approval of the Virginia Department of Criminal Justice Services. **Copies of the necessary PIC forms/documentation to show proof of participation are attached.** By submission of this documentation, I, the designated Campus Security Officer contact person, do hereby certify that all entries are true and complete. I understand that all information on this application is subject to verification.

Regulation 6 VAC 20-270 requires Campus Security Officers to receive a **legal update** as part of the training requirement toward re-certification.

_____ (Please initial) Yes, the officer has received a campus safety/security legal update as indicated on the attached credit assignment documentation.

CSO Point of Contact Name: _____

CSO Point of Contact Driver's License No.: _____ State of License: _____

Date: _____

Please submit the completed form with documentation to DCJS

Virginia Department of Criminal Justice Services, Division of Law Enforcement, 1100 Bank Street, Richmond, VA 23219

Fax: 804-786-0410 or Email: campussecurity@dcjs.virginia.gov