



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

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**Request for Waiver of Instructor Approval Qualifications**

*In accordance with Virginia State Regulation 6 VAC 20-270, the Virginia Department of Criminal Justice Services (DCJS) may approve instructors to deliver Campus Security Officer curriculum training and may revoke such approval for just cause. Applicants for instructor approval may submit a Request for Waiver of Instructor Approval Application form for review by DCJS outlining previous instructor training or related experience. DCJS reserves the right to review each waiver application, and evaluate qualifications and experience on an individual basis.*

Applicant Name (First, MI, Last): \_\_\_\_\_

Applicant Title: \_\_\_\_\_

Applicant Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant Driver's License No.: \_\_\_\_\_ State of License: \_\_\_\_\_

Applicant Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Employer's CSO Point of Contact Name: \_\_\_\_\_

CSO Point of Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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1. Waiver is being sought of the following qualification(s) because the proposed instructor (*Check all that apply*):

- does not possess a high school diploma or equivalent (*GED, etc.*).
- if applicant possesses a diploma, provide school (or equivalent) name & location: \_\_\_\_\_
- has not successfully completed one year of demonstrated teaching/instructor experience in an accredited educational institution, law enforcement or security agency.
- does not possess a minimum of 2 years management/supervisory experience as a campus security officer or supervisory experience with any federal, state, county or municipal law-enforcement agency; OR does not have 3 years general experience as a campus security officer, or with federal, state, or local law-enforcement in a related field.

2. Provide any additional information relative to the statement indicated in #1 (*you may attach separate sheet of paper detailing information*):

3. Attach any supporting documentation which you feel would enhance your application for waiver (*e.g., resume, letters of recommendation, training and certification documentation, etc.*).

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I, the applicant indicated above, do hereby certify that all entries and attachments to this application are true and complete. I understand that all information is subject to verification. I successfully completed the mandated entry-level Campus Security Officer Certification Training as offered by Sponsor: \_\_\_\_\_ on date: \_\_\_\_\_

Applicant initials: \_\_\_\_\_ Date: \_\_\_\_\_

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I, the designated Point of Contact (POC) for the Employer indicated above, requests DCJS to approve this applicant for instructorship in the delivery of the Campus Security Officer curriculum.

Point of Contact's Name: \_\_\_\_\_

Point of Contact's Driver's License No.: \_\_\_\_\_ State of License: \_\_\_\_\_ Date: \_\_\_\_\_

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**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](mailto:campussecurity@dcjs.virginia.gov)

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FOR OFFICIAL DCJS USE ONLY: Instructor approval is granted for the above applicant based on the documentation outlined and included with this Request for Waiver of Instructor Approval submittal.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_