



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

Educational Requirement Waiver Application

In accordance with Virginia State Regulation 6 VAC 20-270-70, the Virginia Department of Criminal Justice Services (DCJS) may approve an educational requirement waiver for a Campus Security Officer who has been continuously employed in that capacity at a college, university, or PSS business under contract to a college or university for a minimum of five (5) years prior to January 31, 2011. DCJS may revoke such approval for just cause. Applicants for CSO Educational Requirement Waiver may submit this waiver application form for review by DCJS outlining previous CSO training or related experience. DCJS reserves the right to review each waiver application and evaluate qualifications and experience on an individual basis.

CSO Name (First, MI, Last): _____

CSO Phone: _____ Email: _____

Employer: _____

School/University (if employer is private security company): _____

Employer's Address: _____

1. A waiver is being sought because the applicant has been continuously employed in a CSO capacity at a college, university or PSS business under contract to a college or university for a minimum of five (5) years prior to January 31, 2011, yet does not possess a high school diploma, GED, or any other secondary school credentials.
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 to the additional information listed in #2. This includes any documentation that would enhance your application for waiver (*e.g., resume, letters of recommendation, training and certification documentation, etc.*).
4. Attach the completed CSO Tests, along with the test score, signed by a DCJS CSO Instructor.

I, the CSO applicant indicated above, do hereby certify that all entries, attachments, and tests attached 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 Testing as offered by

Sponsor: _____ on date: _____

implemented by (DCJS CSO Instructor): _____

implemented at (college, university, or PSS name and address): _____

Applicant Initials: _____

I, the designated Point of Contact for the Employer indicated on this application, request DCJS approve this applicant for the position of Campus Security Officer.

Point of Contact's Name: _____

CSO Point of Contact Title/Position: _____ Date: _____

Please submit the completed form with documentation to DCJS

DCJS Virginia Center for School and Campus Safety/CSO Program, 1100 Bank Street, Richmond, Virginia 23219

Fax: 804-225-3853 or Email: campussecurity@dcjs.virginia.gov

FOR OFFICIAL DCJS USE ONLY: Certification as a Campus Security Officer is granted for the above applicant based on the documentation outlined and included with this CSO Educational Requirement Waiver for Experienced Officers submittal.

Signature: _____ Title: _____ Date: _____