

OHIO STATE HIGHWAY PATROL ACADEMY

Personal Information Sheet

Please complete entire form

Course _____ Course Dates _____

Applicant Name _____

Chief or Sheriff Authorizing
(Type or print name)

Chief or Sheriff Authorizing
(Signature)

Agency Name

Agency Phone Number

Agency Fax

Chief's E-mail Address

Training Officer E-mail Address

Spouse Name _____

Military Information _____

- Copy of enclosed Commission and Oath of Office from O.P.O.T.C. to verify applicant as a sworn police officer should accompany this application unless officer has not yet been appointed. If not appointed, it shall be hand-carried the first day of class.
- The **original** Oath of Office (SF116) and Medical Examination Form (SF 114) **must be submitted**. (No copies or signature stamps).
- Mail application, medical , fingerprint cards, computerized criminal history (CCH) using a ZSO search field, and Oath of Office to:

Basic Commander
Ohio State Highway Patrol Training Academy
Office of Recruitment & Training
740 East 17th Avenue
Columbus, OH 43211-2474

To locate forms needed, please use the following path:

www.ag.state.oh.us

Click on the word **forms**

Look for Law Enforcement, then Law Enforcement Training, then click on **Peace Officer Basic Training Forms**

Under OPOTC forms, you will need:

OPOTC Student Acknowledgement Form (6 pages)

OPOTC Waiver of Liability and Indemnity Agreement

Under School Forms, you will need:

SF101unv Statement of Understanding (2 pages)

SF102unv Request for National Webcheck – Law Enforcement

SF114bas OPOTC Student Health Data Form

SF115unv Student Enrollment/Certification Record

SF116bas Peace Officer Commission and Oath of Office

12/22/08

Application Checklist

- SF101unv Statement of Understanding**
- SF102unv** Request for National Webcheck – Law Enforcement**
- SF114bas OPOTC Student Health Data Form**
- SF115unv Student Enrollment / Certification Record**
- SF116bas Peace Officer Commission and Oath of Office**
- Student Acknowledgement Form**
- Waiver of Liability and Indemnity Agreement**
- OSHP Physical Assessment**

****This form must be completed showing compliance with fingerprint requirements prior to class commencing, but no earlier than 90 days prior to the class start date.**