



**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 Title: _____

CSO Phone: _____ Email: _____

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

Employer: _____

Employer's Address: _____

Employer's CSO Point of Contact Name: _____

CSO Point of Contact Phone: _____ Email: _____

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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 & certification documentation, etc.*).
 4. Attach the completed CSO Tests of CSO Modules I-IV, along with the test scores on each test, 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: _____ CSO Instructor's Name: _____

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: _____

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

Please submit the completed form with documentation to DCJS

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

By fax: 804-786-0410 or *By email:* jessica.smith@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: _____