



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

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**Training Class Request**

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**REQUESTED BY**

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

Instructor Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employer/ College Point of Contact: \_\_\_\_\_

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

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**HOST INFORMATION**

Host Locality (college or business): \_\_\_\_\_

On-Site Classroom Training Dates: \_\_\_\_\_

On-Site Daily Classroom Start Time: \_\_\_\_\_

On-Site Daily Classroom End Time: \_\_\_\_\_

Number of Students to be Trained: \_\_\_\_\_

Number of Seats Available to Other Organizations: \_\_\_\_\_

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**ON-SITE CLASSROOM TRAINING LOCATION**

Facility Name: \_\_\_\_\_

Street, City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email (if applicable): \_\_\_\_\_

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Training materials (curriculum, instructor content, tests/answer keys, and class roster) are currently provided to instructors in an electronic file format. Test questions *may* be randomly generated from a test bank and new test files may be provided upon receipt of your training class request.

Upon completion of your classroom training, please mail the completed tests, as well as your class roster to *DCJS, Division of Law Enforcement, Attn.: CSO Training Class, 1100 Bank Street, Richmond, VA 23219*. Please have students provide a legible e-mail address on the class roster so they may receive a digital copy of their Campus Security Officer certificate. If you prefer to have the certificate sent to the Employer Point of Contact, please indicate so on the class roster.

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**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](mailto:jessica.smith@dcjs.virginia.gov)

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