Welcome to the Private Security Certification and Licensing Program

Attached you will find the application for a new applicant, adding a new certification/licensure or upgrading. Please make sure to complete it in its entirety. Incomplete or illegible forms/documents may delay issuance of a certification or licensure. For minimum standards (OAR 259-060-0020), procedures (OAR 259-060-0025) or general questions please refer to our website at http://www.oregon.gov/dpsst/ps. You may also contact our office through email at security.investigators@state.or.us or by calling our office at: (503)378-8531.

Important information for all applicants

1) What is required for a completed NEW application packet?
   • PS-1 – Application for certification or licensure;
   • PS-6 – Completion of required training & minimum qualifications for appropriate level of certification or licensure;
   • PS-20 – Temporary Work Permit (if currently employed);
   • PS-27 – Code of Ethics;
   • Fees; and
   • *Fingerprints – options & information: http://www.oregon.gov/dpsst/PS/Pages/fingerprintinginfo.aspx
   *If using Fieldprint, Inc. – You must include a copy of your ‘Confirmation Page’ with your PS-1 upon submission to DPSST.

2) What is required for a completed application packet when ADDING a certification or licensure?
   • PS-1 – Application for certification or licensure;
   • PS-6 – Completion of required training & minimum qualifications for appropriate level of certification or licensure;
   • PS-20 – Temporary Work Permit (if currently employed);
   • PS-27 – Code of Ethics; and
   • Fees
   If adding an Armed Professional certification: Include a PS-23 – Change of Information form

3) What is required for a completed application packet when UPGRADING from Unarmed to Armed Certification?
   • PS-1 – Application for certification or licensure;
   • PS-6 – Completion of required training & minimum qualifications;
   • PS-23 – Change of Information;
   • PS-27 – Code of Ethics; and
   • Fees

4) For a List of Certified Private Security Instructors that can provide the training for professional applicants, please refer to the following link: http://www.oregon.gov/dpsst/PS/docs/Instructorlist.pdf
   Please note: A Certified Private Security Instructor will complete a Training Affidavit (PS-6) once you have completed your required training. This form is only valid if submitted to the department within 180 days of the training completion date. [OAR 259-060-0060].

5) For a class calendar for training provided by DPSST to managers and instructors, please refer to the following link: http://www.oregon.gov/dpsst/PS/docs/PSManagerInstClassSchedule.pdf

6) To check the status of your application, access IRIS via the following link: http://dpsstnet.state.or.us/IRIS_PublicInquiry/privatesecurity/smssgoperson.aspx

7) Temporary Work Permits (PS-20s) may be held for up to 120 days. Additional PS-20 requests need prior approval from the department. PS-20’s will not be issued to Instructors or to persons providing armed private security services. [OAR 259-060-0025]

8) Code of Ethics (PS-27) form, affirming moral fitness and professional standards is required to be sent with all PS-1 application materials. Applications submitted without this form will generate a deficiency and delay issuance of certification/licensure.

9) For the definition of Private Security Services, see OAR 259-060-0010.

10) The department may administratively terminate the application process and all fees paid will be forfeited if the Department is unable to complete the certification process due to non-response, non-compliance, upon the discovery of disqualifying criminal convictions or any violation of the temporary work permit provisions.

11) Pursuant to OAR 259-060-0500 payments to the Department are non-refundable and non-transferable.

12) All private security providers must notify the Department within 14 calendar days of any change of address by completing a Private Security Provider Change of Information form (PS-23), which can be found on our website.
# Training Requirements & Fees

## PROFESSIONAL Certification Request:

<table>
<thead>
<tr>
<th>Certification Request</th>
<th>Training Requirements</th>
<th>FEES</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNARMED Professional</td>
<td>● 14 hour UNARMED Basic Classroom/Exam (Attach PS-6)</td>
<td>$65</td>
</tr>
<tr>
<td>ALARM MONITOR Professional</td>
<td>● 12 hour ALARM MONITOR Basic Classroom/Exam (Attach PS-6)</td>
<td>$65</td>
</tr>
<tr>
<td>ARMED Professional (Includes Unarmed Professional)</td>
<td>● 14 hour UNARMED Basic Classroom/Exam (Attach PS-6); and ALARM MONITOR Basic Classroom/Exam (Attach PS-6)</td>
<td>$65</td>
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## INSTRUCTOR Certification Request:

<table>
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<tr>
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<th>Training Requirements</th>
<th>FEES</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNARMED Instructor</td>
<td>● 14 hour UNARMED Basic Classroom/Exam (Attach PS-6); and UNARMED Private Security Instructor Course/Exam</td>
<td>$90</td>
</tr>
<tr>
<td>ALARM Monitor Instructor</td>
<td>● 12 hour ALARM MONITOR Basic Classroom/Exam (Attach PS-6); and ALARM MONITOR Private Security Instructor Course/Exam</td>
<td>$90</td>
</tr>
<tr>
<td>FIREARMS Instructor</td>
<td>● 14 hour UNARMED Basic Classroom/Exam (Attach PS-6); and 24 hour Basic FIREARMS Course (Attach PS-6); and FIREARMS Private Security Instructor Course/Exam</td>
<td>$158</td>
</tr>
</tbody>
</table>

### Additional Requirements
- Each applicant for instructor certification must provide proof of 3 years work experience in private security, law enforcement, or military police.

## MANAGER Licensure Request:

<table>
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<tr>
<th>Certification Request</th>
<th>Additional Requirements</th>
<th>FEES</th>
</tr>
</thead>
<tbody>
<tr>
<td>SUPERVISORY Manager</td>
<td>● Basic Classroom/Exam for Professional Certification (Attach PS-6); and Manager Course/Exam</td>
<td>$75</td>
</tr>
<tr>
<td>EXECUTIVE Manager</td>
<td>● Basic Classroom/Exam for Professional Certification (Attach PS-6); and Manager Course/Exam</td>
<td>$250</td>
</tr>
</tbody>
</table>

## A CRIMINAL HISTORY BACKGROUND FEE IS REQUIRED FOR ALL NEW APPLICANTS

### CRIMINAL HISTORY BACKGROUND FEE
- If applying for: Unarmed, Armed/Unarmed, Alarm Monitor Certification → → → +$41.75 OR
- If ONLY applying for: Instructor Certification or Manager Licensure → → → +$42.75

## UPGRADE Request:

<table>
<thead>
<tr>
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<th>Additional Requirements</th>
<th>FEE</th>
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<tbody>
<tr>
<td>ARMED Professional</td>
<td>● 24 hour FIREARMS Course (Attach PS-6)</td>
<td>$20</td>
</tr>
</tbody>
</table>

## ADDING Instructor Certification:

<table>
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<tr>
<th>Certification Request</th>
<th>Pre-requisite/Training Requirements</th>
<th>FEES</th>
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<tbody>
<tr>
<td>UNARMED Instructor</td>
<td>● UNARMED Private Security Instructor Course/Exam</td>
<td>$90</td>
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<tr>
<td>ALARM Monitor Instructor</td>
<td>● ALARM MONITOR Private Security Instructor Course/Exam</td>
<td>$90</td>
</tr>
<tr>
<td>FIREARMS Instructor</td>
<td>● Proof of completion of training from an approved source within five (5) years of the date of application (OAR 259-060-0135); and ● FIREARMS Private Security Instructor Course/Exam</td>
<td>$158</td>
</tr>
</tbody>
</table>

### Price includes a $68 range fee

## ADDING Manager Licensure:

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## ADDING Professional Certification:

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<tr>
<td>ARMED Professional (Includes Unarmed Professional)</td>
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<td>$65</td>
</tr>
</tbody>
</table>
PS-1 Application for Certification or Licensure
Department of Public Safety Standards and Training / Private Security Certification & Licensing Program
4190 Aumsville Hwy SE, Salem, OR 97317-8983
Phone: 503-378-8531 / Fax: 503-378-4600
E-mail: security.investigators@state.or.us
Website: http://www.oregon.gov/dpsst/ps

1

Please indicate the certification and/or licensure you are applying for below:

PROFESSIONAL CERTIFICATION
☐ Unarmed
☐ Armed/Unarmed
☐ Alarm Monitor

MANAGER LICENSURE
☐ Supervisory
☐ Executive

If you are also applying for a Professional Certification – Please indicate the type of Professional Certification above

INSTRUCTOR CERTIFICATION
☐ Unarmed
☐ Firearms
☐ Alarm Monitor

2

General Information

Please type or print clearly

Per OAR 259-060-0015 ~ All private security providers must notify the Department within 14 calendar days of any change of address by completing a Private Security Provider Change of Information form (PS-23).

First Name:

Middle Initial:

Last Name:

Suffix:

*Social Security Number:

Driver’s License Number/State:

Previous Name(s):

Race (Optional):

☐ African American
☐ Asian/Pacific Islander
☐ Caucasian
☐ Hispanic
☐ Native American

Gender:

Date of Birth:

E-mail Address:

Home Phone:

Work Phone:

Cell Phone:

Mailing Address:

City:

State:

Zip Code:

County:

Residence Address (If different):

City:

State:

Zip Code:

County:

*You are required to provide their Social Security Number (SSN) to DPSST. The authority for this requirement is ORS 25.785, ORS 305.385, 42 USC 405(c)(2)(C)(i) and 42 USC 666(a)(13). Your SSN will only be used for child support enforcement and tax purposes. Failure to provide your SSN will be basis to refuse issuance of license or certificate.

3

Education & Certification History

PLEASE CHECK ALL THAT APPLY & TYPE OR PRINT CLEARLY

Per OAR 259-060-0020 ~ Applicants for certification or licensure must have earned one of the following:

☐ High School Diploma
☐ GED
☐ 2 or 4 Year Degree*

*Issued by an accredited degree-granting college or university recognized by the Oregon Office of Degree Authorization [ORS 348.594(2)]

Have you ever applied for or been certified as a private security provider in Oregon?

☐ NO
☐ YES - PSID#: __________________________
Training Request

Complete this section ONLY if applying for Instructor Certification or Manager Licensure

DPSST Instructor/Manager Training Date Request

1st Choice: ____________________________ 2nd Choice: ____________________________

For class availability please visit the Training Calendar on the DPSST website: www.oregon.gov/DPSST/PS

Private Security Employment

PLEASE TYPE OR PRINT CLEARLY

Are you currently employed as a Private Security Provider?  □ YES  □ NO

Current Employer (Name & Address): __________________________________________

Current Employer (Name & Address): __________________________________________

Current Employer (Name & Address): __________________________________________

(please list additional employers on a separate sheet)

Moral Fitness

Oregon Revised Statutes (ORS) and Oregon Administrative Rules (OAR) require all private security applicants and providers uphold the core values established by the Board of Public Safety Standards and Training and be of good moral fitness as determined by a criminal background check, department investigation or other reliable sources. Lack of good moral fitness includes, but is not limited to, mandatory or discretionary disqualifying misconduct as described in OAR 259-060-0300.

To view the criminal disqualifier listing please visit the following website:

1) Has a certification or license in any other occupation or professional capacity issued in your name in any state or by the federal government ever been refused, suspended, revoked or restricted OR have you ever voluntarily relinquished a certification/license?

□ YES  □ NO  If yes, attach an explanation and provide date, location, and nature of offense.

2) Have you ever been convicted of, arrested OR is there any action pending against you for any criminal offense?

□ YES  □ NO  If yes, attach an explanation and provide date, location, and nature of offense.

3) Have you ever been investigated, required to appear before or been sanctioned by any professional body or federal or state agency for alleged misconduct – including DPSST?

□ YES  □ NO  If yes, attach an explanation and provide date, location, and nature of offense.

Signature of Applicant

The information contained in this application is true and correct to the best of my knowledge. I understand that falsification of any documents submitted to the department may be cause for denial, suspension or revocation of certification or licensure under ORS 181A.870 and OAR 259-060-0300, and subject to a civil penalty under OAR 259-060-0450. I further understand that the information provided in this application will be used to conduct a background investigation.

Signature: ____________________________ Date: ____________________________

CASHIERS/BUSINESS CHECK OR MONEY ORDER - Payable to: DPSST

～Cash/Personal checks will NOT be accepted～

MAIL TO:
Department of Safety Standards & Training
Private Security Certification & Licensing
4190 Aumsville Hwy SE
Salem, Oregon  97317

CREDIT OR DEBIT CARD PAYMENT

Credit Card Authorization Form:

Print, complete & mail with all other application materials
Or
Fax payment form to:
(503) 373-1449

Please note: DPSST cannot accept emailed credit card authorization forms