



LICENSE ELIGIBILITY

PEACE OFFICER STANDARDS AND TRAINING BOARD

PFN3 (03/18)

Name (Last, First, Middle)	Social Security Number
----------------------------	------------------------

Driver's License Information

Driver's License Number	State:
Driver's License Abstract(s) Obtained	<input type="checkbox"/> Yes <input type="checkbox"/> No

List any Criminal Traffic Arrests, Convictions or Implied Consent Violations Regardless as to Final Disposition (Include Dates and Jurisdictions)

Criminal History Records Checks

Fingerprint Criminal History Has Been Conducted (FBI)	<input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

List any Criminal Arrests and Convictions Regardless as to Final Disposition (Include Dates and Jurisdictions)

Psychological and Medical Examinations

Name of Psychological Provider	Date of Exam	Results		
		<input type="checkbox"/> Acceptable	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
Doctor/Medical Facility			Date of Exam	

Attach information concerning the disposition of arrests and convictions listed on this form.

Attach criminal history records check letter from BCI.

This form should be sent along with forms PFN1 and PFN2 to :

**POST Board
 PO Box 1054
 Bismarck ND 58502-1054**

Agency Administrator Signature	Date
--------------------------------	------