

## **LICENSE ELIGIBILITY**

## PEACE OFFICER STANDARDS AND TRAINING BOARD PFN3 (05/19)

Name (Last, First, Middle)			Social Security Number
	Driver's License Informatio	n	
Driver's License Number			State:
Driver's License Abstract(s) Obtained			Yes No
List any Criminal Traffic Arrests, Convictions or Implie	ed Consent Violations Regardless	s as to Final Disposition (Inclu	de Dates and Jurisdictions)
	Criminal History Records Che	cks	
Fingerprint Criminal History Has Been Conducted (FBI)			☐ Yes ☐ No
List any Criminal Arrests and Convictions Regardless	as to Final Disposition (Include I	Dates and Jurisdictions)	
	ychological and Medical Exami		
Name of Psychological Provider/Doctor	Date of Exam		sults
Name of Medical Facility/Doctor		Acceptable Marg	ginal Unacceptable Date of Exam
Attach information concerning the disposition of Attach criminal history records check letter from This form should be sent along with forms PFN1 a	BCI. and PFN2 to : POST Board PO Box 1054		Date
Agency Administrator Orginature			Date