

REQUEST FOR INACTIVE STATUS (PFN15)

NORTH DAKOTA PEACE OFFICER STANDARDS AND TRAINING (POST) BOARD SFN 62316 (05/23)

Peace Officer License Number or Social Security Number	Name (Last, First, Middle)	
Email Address		
I request the North Dakota Peace Officer Standards and Training Board place my license on inactive status.		
Peace Officer's Signature (typed name is the legal equivalent of a handwritten signature)		Date

Please retain a copy of this form and forward the original to the POST Board at:

POST Board PO Box 1054 Bismarck ND 58502-1054

Your social security number is requested by the North Dakota Peace Officer Standards and Training Board to complete the licensing application process under NDCC § 12-63-06. Disclosure of your social security number is voluntary. However, not providing this information may result in a delay in processing your license application and correct individual identification.