

# STATE OF TENNESSEE PEACE OFFICER STANDARDS AND TRAINING COMMISSION 3025 LEBANON ROAD NASHVILLE, TENNESSEE 37214-2217 PHONE: 615-741-4461 FAX: 615-532-0502

Thank you for your request to renew your LEOSA Certification. In order to renew, you will need to take the following steps:

Complete and sign the LEOSA Renewal for Retired Law Enforcement Officers form. (IN-1733)

You have the option of a card that is renewable every four years, which is valid ONLY in the State of Tennessee, or a card that is renewable annually, <u>as of 7/1/2017 a TBI/FBI fingerprint report is required</u> for the annual nationwide card. See below for IdentoGo fingerprint instructions.

Go to an approved firing range and qualify. You will need a certificate and firearms roster showing qualification. The roster needs to list each weapon qualified with including make, model, serial number and caliber.

Return form IN-1733, a copy of your Certificate and roster from the range, and a check for \$10.00 made out to the P.O.S.T. Commission to our office at 3025 Lebanon Pike, Nashville, TN 37214. This can be done either in person, or by mail. After we have processed your request, you will be issued a new card and certificate.

Please contact our office at 615-741-4461 if you have any questions.

At the IdentoGO vendor, an applicant's fingerprints will be taken electronically and submitted directly to the TBI/FBI. The criminal history report will be sent to our office in five (5) to seven (7) days. A fee is payable directly to IdentoGO at the time the applicant's fingerprints are taken.

- 1) Go to www.identogo.com and choose Tennessee on the map
- 2) Click Online Scheduling and choose English
- 3) Enter first and last name

Agency Name: OTHER

Applicant Type: P.O.S.T. Commission

ORI number: TN920754Z

4) On the next screen, you should verify your agency and then select appointment location/date/time.



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3025LEBANON PIKE NASHVILLE, TENNESSEE 37214-2217 PHONE: 615-741-4461 FAX: 615-532-0502

#### **LEOSA Renewal Application**

First Name:	Last Name:	MI:_
SSN(last four digits):	DOB:/	
Rank:	Badge #:Employee ID	):
Street Address:		
City:	State:Zip G	Code:
Home Ph. #	Cell Ph. #	
Driver's License#	State	
Retired Agency/Department		

#### Please indicate clearly which option you are selecting for certification:

Option 1- Valid in Tennessee only: This certification, pursuant to T.C.A. §38-8-116, does not meet the requirements of 18 U.S.C.A. § 926B and C [Retired Law Enforcement Officer Safety Act (LEOSA)]. A retired officer certified under this option is not permitted to carry a firearm outside of the state of Tennessee unless otherwise authorized. A TBI/FBI criminal history record check and qualification to carry a firearm of the same type according to the standards established by the Tennessee P.O.S.T. Commission are required every four (4) years. This certification is valid only in Tennessee for period of four (4) years.

#### <u>OR</u>

Option 2- LEOSA Compliant (valid Nationwide): This certification, pursuant to T.C.A. § 38-8-123, conforms to the requirements of 18 U.S.C.A. § 9.2613 and C. A retired officer certified under this option is eligible to carry a firearm nationwide under federal law. Please note that a certification issued to a retired officer in accordance with this option shall be automatically revoked by operation of law upon the retired officer becoming ineligible to carry a firearm under federal law. This certification requires an annual qualification to carry a firearm of the same type according to the standards established by the Tennessee P.O.S.T. Commission, and an annual TBI/FBI criminal history record check. This certification is valid for only one (1) year. As of 7/1/2017 TBI/FBI fingerprint report required annually for renewal.

1.	Applicant shall not have been convicted of any felony offense punishable by a term exceeding one (1) year. Initial
2.	Applicant shall not currently be under indictment for any criminal offense punishable by a term exceeding one (1) year. Initial
3.	Applicant shall not be currently the subject of an order of protection. Initial
4.	Applicant shall not be a fugitive from justice. Initial
5.	Applicant shall not be an unlawful user of or addicted to alcohol or any controlled substance and the applicant has not been a patient in a rehabilitation program or hospitalized for alcohol or controlled substance abuse or addiction within ten (10) years from the date of the application. Initial
6.	Applicant shall not been convicted of the offense of driving under the influence of an intoxicant in this or any state two (2) or more times within ten (10) years from the date of application and that no convictions has occurred within five (5) years from the date of application or renewal. Initial
7.	Applicant shall not have been adjudicated as mental defective or incompetent; committed to or hospitalized in a mental institution; appointed by a court conservator for reason of mental effect; judicially determined to be disabled by reason of mental illness, development disability or other mental application; found by a court to pose an immediate substantial likelihood of serious harm, as defined in T.C.A. Title 33, Chapter 6, Part 5, because of mental illness. Initial
8.	Applicant shall not have been discharged from the Armed Forces under anything other than honorable discharge Chapter 1340-02-0502(5). Initial
9.	Having been a citizen of the United States, applicant shall not have renounced their citizenship. Initial
10.	Applicant shall not have been convicted of a misdemeanor crime of domestic violence as defined in 18 U.S.C.A. 921(33). Initial
11.	Applicant shall not be receiving social security disability benefits for reason of alcohol dependence, drug dependence or mental disability. Initial
12.	Applicant shall not have been convicted of the offense of stalking. Initial
13.	Applicant shall have retired from an agency in good standing with a minimum of ten (10) years total creditable service in a commissioned status. Initial
14.	Applicant shall have had powers of arrest at the time of retirement. Initial
15.	Applicant must carry the handgun you qualify with (H.R. 218). Initial
	ave read the above qualifications and attest to the fact that I am in compliance with these lifications.
Sign	nature: Date:



### PEACE OFFICER STANDARDS AND TRAINING COMMISSION



## L.E.O.S.A. Firearms Training Completion Certificate

Ι,		, do hereby certify that
	Print Name of Firearms Instructor	
Retired Offic	er:	
	Print Name of 1	
Has successfully	completed a course of fin	rearms instruction and training this
	Day of	, 20
the		
	Name and Address of Firear	
		tified Firearms Instructor with
I further certify  And that the 18 U.S.C. §926 a	v that I am a P.O.S.T. Cer  Name of Agency or Institute e prescribed course is P.O.S.T. and T.C.A. Code §38-8-116 entire mend that the aforemention	tified Firearms Instructor with