

Is applicant the sole owner of agency/firm? Yes No

If "No", indicate names, addresses, phone numbers and titles of all board members and president associated with the college. (Attach additional sheets if necessary.)

Has applicant ever been arrested? Yes No
(If "Yes", attach a separate sheet giving complete details and results.)

Are there any unpaid judgments of debt now outstanding against the applicant? Yes No
(If "Yes", attach a separate statement giving complete details.)

Is your campus agency currently contracted with another corporation or business entity to provide private police services? Yes No
(If "Yes", please attach a separate sheet that lists names, addresses, and phone numbers for each.)

APPLICATIONS MUST BE ACCOMPANIED BY:

1. Agency originating documentation which specifies the agency's law enforcement functions.
2. A copy of the campus agency's insurance policy, or if self-insured, the certificate of self-insurance (applicable to non-public entities only).
3. Statements indicating the results of a criminal history records check of each agent/board member of the public or private entity, through the clerk of superior court in each county where the individual resided or maintained a residence or place of business over a five year period prior to such application.
4. If application is NOT signed by the Chairman of the Board for College, the person authorized to sign application must have letter (attach to application) signed by the Chairman and board members authorizing the individual to submit application with a copy of the resolution from the board requesting such action.
5. The appropriate application fee. (\$250.00)

Applications that do not include this information will NOT be accepted.

This affidavit to be executed by applicant before a notary public:

As the applicant for Campus Police Agency Certification, I attest that I have read and am familiar with the regulations provided for in G.S. 74G – The Campus Police Act and 12 NCAC 2J of the North Carolina Administrative Code. *I further understand and agree that any omission, falsification, or misrepresentation of any factor or portion of the required documentation can be the sole basis for denial, suspension, or revocation of agency certification at any time, now or later.*

Signature of Applicant/Authorized Representative _____

Driver License Number _____

Sworn and Subscribed to before me this _____ day of _____, 20____.

My Commission expires _____

Notary Public