

## Participant Registration Form- Licensing Courses

Your name will appear on your certificate as written. Please use your legal name and type or print clearly.

Basic County Corrections	Public Safety Telecommunicator	Basic Jail Certification for Texas Peace Officers
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### PARTICIPANT INFORMATION

\*Social Security Number (SSN) is used for record keeping purposes only and TCOLE credit (if applicable).

Last Name:			First Name:			Middle Initial:		Suffix:	
Date of Birth:		TEEX ID #:		OR	Last 4 of SSN#:		OR	FEMA SID #:	
U.S. Citizen?	Yes	No	TCFP FIDO #:			Veteran?	Yes	No	
Email:					Phone Number:				

### TCOLE (TEXAS COMMISSION ON LAW ENFORCEMENT) - TEXAS PARTICIPANTS ONLY

ENSURE THAT YOU HAVE INCLUDED YOUR DATE OF BIRTH IN THE STUDENT INFORMATION SECTION ABOVE.

TCOLE PID#:

### AGENCY INFORMATION

Agency Name:			Position/Title:		
Mailing Address:					
City:		State:		Zip Code:	
Email Address:			Phone #:		Fax #:

*"I accept the [Participant Policies](#) including, but not limited to, Transfer, Cancellation, and Release of Liability."*

**I have read and understand the Participant Policies provided in the link above.**

Signature:	Date:
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### ILEPSE USE ONLY

e-token#:	Date issued:	Score:	Date:
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