



PROFESSIONAL LICENSING  
600 SOUTH BAY ROAD, SUITE 1  
DOVER, DE 19901

STATE OF DELAWARE  
DEPARTMENT OF SAFETY AND HOMELAND SECURITY  
DIVISION OF STATE POLICE

PHONE: 302-739-5991  
dsp\_plapplicant@delaware.gov

- New Application – Bail Enforcement Agent**
- Renewal Application- Bail Enforcement Agent – Badge # \_\_\_\_\_**  
(BEA licensed before 09/01/2023 – MUST return their previously issued metal badge to Professional Licensing)
- Firearms -New/Initial (Optional-only New Applicants) – Attach Handgun Certification Form**

**Fingerprint/Photo Appointment Date with IdentiGO: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_** Consult directions for IdentoGO on Page #2

**Full Name:** \_\_\_\_\_  
Last
Suffix
First
M.I

**Alias, Previous or Maiden Name:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**State Born In:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City/State/Zip/County:** \_\_\_\_\_

**Home Phone Number:** \_\_\_\_\_

**Cell Phone Number:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Driver’s License (state/number):** \_\_\_\_\_

**Gender:** \_\_\_\_\_ **Race:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_ **Eyes:** \_\_\_\_\_ **Hair:** \_\_\_\_\_

**CONTINUE TO NEXT PAGE**

**OFFICIAL USE ONLY:**

<b>Date:</b>	<b>Approved</b> _____ <b>Denied</b> _____
<b>WARRANTS:</b> _____ <b>Yes</b> _____ <b>No</b> _____	<b>AddA# Line:</b>
<b>PROCESSED BY:</b>	<b>G4:</b>
<b>SBI#:</b>	<b>PFA:</b>
<b>FBI#:</b>	<b>NEW BEA Badge#</b>

**Have you ever had an ID card denied, suspended or revoked through DSP Professional Licensing?**

Yes \_\_\_\_\_ No \_\_\_\_\_ Explain: \_\_\_\_\_

**Be advised that by submitting this application you will be subject to a local, state, and federal criminal history background check. If there is anything you wish to disclose or explain, please use the below space.**

**Have you served in any branch of the United States Military? Yes \_\_\_\_\_ No \_\_\_\_\_**

**If yes, what is the status of your discharge? \_\_\_\_\_**

**AUTHORIZATION TO RELEASE INFORMATION TO CONTRIBUTOR**

As an applicant, I am required to furnish information for use in determining my moral, physical and mental qualifications. In this connection, I authorize release of any and all information that you have concerning me, including criminal history record information and other information of a confidential or privilege nature to my employer. I authorize the Division of Mental Health or any institution to release my mental health history to the Delaware State Police. I hereby release you, your organization, the State of Delaware and others from any liability or damage, which may result from furnishing this information. I have read a copy of the Delaware Code and the promulgated Rules & Regulations as it pertains to the position I am applying for. I realize that any violation of the Law and/or Rules & Regulations could lead to my immediate suspension and/or revocation. I hereby certify that the statements given in this application are true and correct. Failure to fill out this application correctly or if any information is omitted, may result in the application being denied.

**New Applicant – Please attach a copy of Initial Bail Enforcement Training Certification from Delaware Technical & Community College**

6.1 All individuals applying for licensure under 24 Del.C. Ch. 55 must complete a minimum of eight hours of training in 6.1.1 prior to the issuance of an identification card, license and badge.

**Renewal Application – Please attach a copy of your most recent Continuing Education Training Certificate from Delaware Technical & Community College**

7.3 Failure to complete the training every year shall be grounds for suspension or revocation of a current identification card, license and badge or the rejection of a renewal application.

\_\_\_\_\_  
Applicant Signature (electronic signature accepted)

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

Email this form to - [dsp\\_plapplicant@delaware.gov](mailto:dsp_plapplicant@delaware.gov)

Subject Line - BEA Application-First Name Last Name

Individuals must schedule a fingerprint/Photo ID appointment with Identogo – using the link below, then present themselves in-person at the appointment location selected. Once fingerprints are obtained Identogo will then forward all relevant background information to Delaware State Police/Professional Licensing for review.

<https://uenroll.identogo.com/>

- Use Service Code **27RX14**