



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

DELAWARE COMMISSIONED CONSTABLE APPLICATION

☐ New Applicant –Constable/Prior Law Enforcement ☐ New Applicant –/Non-Prior Law Enforcement

☐ Constable Commission Renewal ☐ 2nd Entity

Constable Entity Employer(s): _____

Fingerprint/Photo Appointment Date with IdentiGO: ____/____/____ - New Applicant only

Consult directions for IdentiGO 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: _____

Primary Phone Number: _____

E-Mail Address: _____

Driver's License (state/number): _____

Gender: _____ Race: _____ Height: _____ Weight: _____ Eyes: _____ Hair: _____

CONTINUE TO NEXT PAGE

OFFICIAL USE ONLY:

Date:	Approved _____ Denied _____
WARRANTS: _____ Yes _____ No	AddA# Line:
PROCESSED BY:	G4:
SBI#:	PFA:
FBI#:	

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.

_____ I am submitting my application to be a Commissioned Constable and requesting a Constable Academy Waiver based on being a Prior Law Enforcement Officer. I understand it is my responsibility to attest to this fact on Page #3 and to obtain and provide the outlined documents to Professional Licensing. I further understand my potential Constable employer must complete an "Intent to Hire" Letter using the exact template outlined on Page #4 of this application.

_____ I am submitting my application to be a Commissioned Constable/ Non-Prior Law Enforcement. I further understand my potential Constable employer must complete an "Intent to Hire" Letter using the exact template outlined on Page #4 of this application.

Applicant Signature (electronic signature accepted)

_____/_____/_____
Date

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 27RVRJ

Applicants using **Police/Law Enforcement Experience** must complete Page #3 – outlining **Graduation from a Certified Law Enforcement Academy**. Additional documentation outlined below is also required to be submitted.

Training Facility Name	
Dates of Training (Start/End)	
Date of Graduation/ Certification	
Type of Document submitted for verification	
Name All Agencies you were employed with based on this Graduation/Certification	

Training Facility Name	
Dates of Training (Start/End)	
Date of Graduation/ Certification	
Type of Document submitted for verification	
Name All Agencies you were employed with based on this Graduation/Certification	

Certified Law Enforcement Academy will include a certified training facility where law enforcement officer employed by the government are trained. Verification for this requirement can be done using any of the following formats:

1. Certified Transcript from the Academy/Training Facility
2. Certificate of Completion from Academy/Training Facility
3. Document attesting to Certification as a Law Enforcement Officer from an Accreditation overseer – for example, COPT or POST in Delaware or other states.
4. Retired Delaware State Police Troopers can be confirmed through Professional Licensing.

Intent to Hire Template – use exact wording
PRINT ON
SCHOOL DISTRICT/ENTITY LETTERHEAD

5/10/2023

Constable Board of Examiners
Via Wendy S. Meyers
Licensing Specialist
DSP - Professional Licensing
600 South Bay Road, Suite 1
Dover, DE 19901

Dear Ms. Meyers,

This letter is to notify you that the *John Doe School District* intends to hire *Mr. James Sample* as a constable pending the Constable Board of Examiners approval.

If commissioned, *Mr./Ms. James Sample* will be an employee of John Doe School District and will work within the lawful duties of his or her employment to protect life and property, and preserve peace and good order. In addition, exercise the same powers as peace officers and law-enforcement officers, in order to protect life and property, while in the performance of the lawful duties of employment of *John Doe School District*.

Please feel free to contact me with any questions you may have at entity.leader@district.com or 302-555-5555.

Sincerely,

Live Signature

Name
Title