

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

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

PHONE: 302-739-5991 dsp-prolicense@delaware.gov www.dsp.delaware.gov

DELAWARE COMMISSIONED CONSTABLE - EMPLOYER REQUEST TO BOARD OF EXAMINERS 24 Del. C. 56 - Professions and Occupations

Date submitted		Person submitting name			Person submitting little				
Entity Mailir	ng Address								
City/Town			State				Zip Code		
		Entit	y/Emplo	yer – prov	ide the full n	ame be	elow		
	School		Higl			Med	ical		Other
	District (K-12)			cation					
Is Entity No	n-Profit, Profit,	Governme	ent or Otl	ner?					
	e # of total em	ployees (ir	cluding						
Constables)?									
Approximat	e# of daily visi	tors when	operatin	g?					
Approximate # of students (if school or Higher Ed)?									
Will entity request Armed (handgun) Constables?									
(Yes or No)									
Will entity request Armed (Rifle) Constables?									
(Yes or No)									
Will entity request canines be used by Constables?									
(Yes or No)									
Will the entity equip Constables with a baton/asp?									
(Yes or No)									
Will the entity equip Constables with handcuff									
restraints? (Yes or No)									
Will the entity equip Constables with O/C Defense									
Spray? (Yes or No)									
Will the entity equip Constables with Conducted									
Electrical Weapons (Taser) (Yes or No)									

Rule 4.0 – Uniform Patch / Badge, Seal, Vehicle & Markings, Letterhead, Business Card, Advertisement, etc.

No person licensed under 24 Del.C. Ch. 56 shall wear or display any uniform, patch, badge, seal, vehicle and the markings, letterhead, business card, advertisement, or other form of publication unless first approved by the Board of Examiners.

Please identify all items below which will be utilized by Constables AND attach a PDF or JPEG of <u>each</u> item. Items not available for display to the Board of Examiners may not be utilized until approved.

Uniform Patch	Badge	Letterhead	Business Card	Advertisement, etc.
Entity Vehicles:				
Will the Entity Constable use Entity vehicle? (Yes or No)				
Will Entity Vehicles be marked?				
Will Entity Vehicles have Auxiliary lights?				
What color Auxiliary lights? (amber and/or white only)				

Primary Entity Contact Name	Primary Contact Title
Email address	Phone #
Authorized Entity Contact #1 Name	Contact Title
Authorized Entity Contact #1 Name	Contact fitte
Email address	Phone #
Authorized Entity Contact #2 Name	Contact Title
Email address	Phone #

Describe the entity jurisdiction of the Constable(s). Outline property location(s), campuses, building(s), etc. Include the total # of acres. If available, attach a property map.		
Describe any type of security or law enforcement personnel utilized currently.		

	ally how Constable(s) will be in aid and relief of full-service police agencies and is/are ect life and property in circumstances where full-service police agencies are unable to
	st. A letter or other document may be substituted to answer this question (please attach)
Email form to:	dsp-prolicense@delaware.gov & celina.allton@delaware.gov
Emait form to.	usp-proticense@detaware.gov & cetma.attton@detaware.gov
destruited about the transfer of the transfer	FOR PROFESSIONAL LICENSING USE ONLY
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ENTITY #	APPROVAL/EXPIRATION DATE:
07/2025	

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