FOR OFFICE USE ONLY
EFFECTIVE 1-7-2019
EXPIRES ______
PROCESSED BY _____

NOTICE: Information contained on this application is considered a public record and may be released under the Freedom of Information Act. Under penalty of A.C.A. § 5-53-103, knowingly giving a false statement or submitting a false document constitutes a Class A Misdemeanor.

PURSUANT TO A.C.A § 17-40-301, IT IS UNLAWFUL TO PERFORM ANY FUNCTION REQUIRING A LICENSE, CREDENTIAL OR COMMISSION UNTIL SAID LICENSE, CREDENTIAL OR COMMISSION HAS BEEN ISSUED TO THE APPLICANT.

IN ACCORDANCE WITH THE PROVISIONS IN A.C.A. § 17-40-314, THE BUSINESS OF EACH LICENSEE SHALL BE OPERATED UNDER THE DIRECTION AND CONTROL OF AT LEAST ONE (1) MANAGER.

Please select	one:				FOR OFFICE USE ONLY: nployee Credential Number	PLEASE ATTACH TWO (2) CURRENT PASSPORT STYLE
MANAGER OWNER		MANAGER /	OWNER			PHOTOS TO THIS APPLICATION. Please write applicant's name on the back of the photograph
	_					
NAME	Last		First		MI	_
COMPANY NAM	ME					_
SS#:			DOB:			
SEX:	RAG	CE:	HGT:	WGT: _	EYES:	HAIR:
APPLICANT PH	HYSICAI	L ADDRESS:	Street/P.O. Box	Cit	County	State/ZIP
			,	City	County	State/ZIP
APPLICANT MA	AILING	ADDRESS: _	Street/P.O. Box	City	County	State/ZIP
DRIVER'S LICENSE					HOME PHONE: ()
2111.211.0 2101		State	Number	_		
EMAIL ADDRE	ESS:			_	CELL PHONE: (_)
PLACE OF BIR	TH:					
		City	Cou	ınty	State	Country
***IF YOU ARI		N-U.S. CITIZE	EN, PLEASE ATTAC	H CURR	ENT/VALID PROOF	OF ELIGIBILITY TO
HIRE. THE APP	MUST E PLICANT PLICATI	E SUBMITTED MAY WORK UON HAS BEEN	TO THE ARKANSAS INDER THE SUPERVI PROCESSED BY THI	SION OF 'E DEPART	THE LICENSEE OR C MENT.	LENDAR DAYS OF THE REDENTIAL HOLDER G AND DIRECTING THE

APPLICANT'S ACTIVITIES WHILE IN THE IMMEDIATE PRESENCE (LINE OF SIGHT PROXIMITY) OF THE

APPLICANT AT ALL TIMES. (SEE RULE 2.13)

*** PLEASE SUBMIT A CHECK OR MONEY ORDER ONLY ***

ALL APPLICANTS MUST HAVE A BACKGROUND CHECK. APPLICATION FEE, 2-CLASSIFIABLE FINGERPRINT CARDS, AND BACKGROUND CHECK FEES **MUST BE INCLUDED** WITH THE SUBMISSION OF THIS APPLICATION.

FEE

\$22.00

CODE 82006

STATE BACKGROUND CHECK FEE

FEDERAL BACKGRO	OUND CHECK FEE	FEE	\$11.25	CODE 80019			
FEDERAL BACKGRO	DUND/INA	FEE	\$1.00	CODE 80011			
FEDERAL BACKGRO	OUND CHECK FEE	FEE	\$2.00	CODE 80006			
			тот	AL AMOUNT DUE \$36.25			
HAVE YOU BEEN PREVIOUSLY LICENSED, CREDENTIALED, OR COMMISSIONED?							
□ NO	□ NO						
☐ If yes, please]	provide the following info	ormatio	on.				
Previous Employer N	ame:						
Date employed:/ Date employment ended:/							
Position Held:							
The applicant must list all arrests, pending criminal charges, pleas of nolo contendere, pleas of guilty, or convictions for any felony, Class A misdemeanor offense involving theft, sexual offenses, violence, an element of dishonesty, or a crime against a person as determined by the department (See Rule 2.10). Include all those that have been sealed or expunged (MUST PROVIDE COPY OF ORDER TO SEAL AND ORIGINAL JUDGMENT). Rule 2.9. Prior offenses – The Director of the Department shall deny an application if the applicant has been found guilty or has pleaded guilty or "nolo contendere" to any criminal offense listed in A.C.A. § 17-39-202, § 17-39-206, § 17-39-304, § 17-40-306, or § 17-40-337. (a) A prior conviction will disqualify the applicant even if the conviction has been sealed or expunged; but (b) A prior conviction will not disqualify an applicant if the applicant has received a pardon for the conviction in accordance with A.C.A. § 16-93-201, et seq. (i) To qualify for a commission, the pardon must include a provision for full restoration of firearm rights.							
CHECK APPLICABLE BOX:							
NO, I DO NOT HAVE ANY RECORDS OF ARREST, PENDING CRIMINAL CHARGES, CONVICTION(S) OR PLEA(S) OF NOLO CONTENDERE OR GUILTY.							
YES, I DO HAVE RECORDS OF ARREST, PENDING CRIMINAL CHARGES, CONVICTION(S) OR PLEA(S) OF NOLO CONTENDERE OR GUILTY.							
LIST ALL RECORDS OF ARREST, PENDING CRIMINAL CHARGES, CONVICTION(S) OR PLEA(S) OF NOLO CONTENDERE OR GUILTY.							
Charge	Location	Date		Disposition			

NOTICE: A VERIFIED STATEMENT (ANY COURT DOCUMENT, ARRESTING AGENCY REPORT OR INFORMATION FROM A PROSECUTOR'S OFFICE) REGARDING ANY CHARGE LISTED ABOVE MUST BE ATTACHED TO THIS APPLICATION.

Do you suffer from habitual drunkenness?	Yes 🔲	No 📙
Do you suffer from narcotics addiction or dependence?	Yes 🗌	No 🗌
Have you been dishonorably discharged from the United States Armed Forces?	Yes 🗌	No 🗌
Have you been adjudicated as mentally incompetent?	Yes 🗌	No 🗌
Have you been involuntarily committed to a mental institution?	Yes 🗌	No 🗌
Have you been involuntarily committed to a mental health treatment facility?	Yes 🗌	No 🗌
Are you a registered sex offender or required to register as a sex offender?	Yes 🗌	No 🗌
Are you on active duty military service? (Please attach a copy of the DD-214)	Yes 🗌	No 🗌
Are you the spouse of an active duty service member? (Please attach a copy of the DD-214)	Yes 🗌	No 🗌
Are you a returning military veteran applying within one (1) year of discharge from active (Please attach a copy of the DD-214)	ve duty? Yes □	No 🗌
Are you the spouse of a returning military veteran applying within one (1) year of discharge attach a copy of the DD-214)	arge from active Yes 🗌	e duty? No 🗌

EXAMINATIONS

ALL MANAGERS MUST TAKE THE EXAMINATION AND MUST SCORE SEVENTY PERCENT (70%) OR ABOVE IN ORDER TO CONSTITUTE SUCCESSFUL COMPLETION (THE OWNER OF A COMPANY IS EXEMPT FROM AN EXAM IF THEY HAVE A CREDENTIALED MANAGER).

IF AN APPLICANT FAILS TO SUCCESSFULLY COMPLETE THE REQUIRED EXAMINATION HE OR SHE:

- MUST WAIT FIVE (5) WORKING DAYS IN ORDER TO RETAKE THE TEST
- MUST PAY A RE-EXAMINATION FEE OF \$50.00

FAILURE TO SUCCESSFULLY COMPLETE THE EXAMINATION AFTER TWO (2) ATTEMPTS SHALL RESULT IN CANCELLATION OF THE PENDING APPLICATION. UPON CANCELLATION, THE APPLICANT MUST REAPPLY AS A NEW APPLICANT AND IS SUBJECT TO PAY REQUIRED APPLICATION FEES.

VERIFICATION AND AUTHORITY TO RELEASE

TO WHOM IT MAY CONCERN

Under penalty of A.C.A. § 5-53-103, I the undersigned hereby affirm that all information contained on this application is true and correct. I understand that giving a false statement or submitting a false document will subject me to criminal prosecution, preclude future Arkansas Private Investigator, Security, Alarm Installation, and Monitoring license, commission, or credential issuance, and/or immediate revocation of any license, commission, or credential already issued by the Department.

I understand that the Arkansas State Police will conduct a thorough background investigation before rendering a final decision regarding my eligibility for a License, Commission and/or Credential and this investigation may include, but not be limited to, inquiries as to my abilities, character, reputation, criminal record, and past employment record.

To facilitate this investigation, I do, hereby, give my consent and authority for any educational institution, hospital, mental institution, including specifically the Arkansas State Hospital and Veterans Administration Hospital, medical doctor, police agencies, the Arkansas Crime Information Center, Federal Bureau of Investigation, National Crime Information Center, Interstate Information Index, credit reporting agencies, former employers, and former business associates to furnish information from their records to the Arkansas State Police. I do, hereby, give my consent and authority that any information (including sealed or expunged criminal history) and/or evidence gathered or received by the aforementioned agencies may be submitted to any court, board, or commission in open hearing or court in any judicial or administrative proceeding.

With regard to any credit reporting agencies which might be contacted by the Arkansas State Police, I understand that I may inquire as to the identification of those credit reporting agencies contacted, and the Arkansas State Police will advise me as to the identity and the nature and scope of information they furnished.

PRINT FULL NAME:	
SIGNATURE:	DATE:

APPLICANT RECORD NOTIFICATION

Notification: Fingerprints submitted will be used to check the criminal history records of the FBI. **Obtaining Copy:** Procedures for obtaining a copy of FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.30 through 16.33 or go to the FBI website at http://www.fbi.gov/about-us/cjis/background-checks.

<u>Change, Correction, or Updating:</u> Procedures for obtaining a change, correction, or updating of an FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.

Rev. December 2016