

KANSAS CITY MISSOURI POLICE DEPARTMENT
PRIVATE OFFICERS LICENSING UNIT
635 WOODLAND, SUITE 2104
KANSAS CITY, MISSOURI 64106

FORMER LAW ENFORCEMENT PERSONNEL

Name _____ Date _____

Dates employed by the _____ Police Department.

From _____ To _____

1. In what capacity were you employed? Law Enforcement Civilian
2. Are you a Reserve Officer? Yes No
3. Were you terminated? Yes No
4. Did you leave under threat of termination? Yes No

If yes, to #3 or #4 explain:

I authorize the Private Officers Licensing Unit to confirm the terms of my separation from the Human Resources Division outlined above.

Signature _____

Printed Name and Serial # _____

Address _____