

RIC L. BRADSHAW, SHERIFF





## Outside Agency & Returning PBSO H.R. 218 Application

Previous H.R. 218 Qual Date		
Applicant Name	SSN	
Current Address		
Contact Phone Number	D.O.B	
Agency Retired /Separated From		
Email Address	Race Ge	nder
*If you are applying from an outside agency, you agency advising that you left in good standing and applicants only; must be on agency letterhead), as Office.	that you were employed for a minimum of	of 10 years (1st time
We strongly encourage those who are interest review H.R. 218 (Law Enforcement Officers Snecessary criteria and documentation require	Safety Act of 2004) in its entirety to en	isure that they meet all
Did you retire/separate in good standing with: at le officer; OR a service connected disability other that	• • • • •	forcement or correctional
Have you been confined or committed to a mental psychiatric condition on a temporary or permanent	•	ervation for a mental or
Are you in possession of a medical marijuana card	? Yes No	
Were you authorized to engage in or supervise the incarceration of any person for any violation of law	-	
Are you prohibited under state or federal law from	receiving or possessing a firearm? Yes	No

PBSO #0658 REV. 10/21 See Reverse Side

o you have any physical limitations that would interfere with the proper handling of a handgun? Yes No
o you understand that the definition of Firearm does not include any machine guns, firearms silencer, or estructive device? Yes No
re you under the influence of alcohol or other intoxicating or hallucinatory substances? Yes No
o you understand that you must carry the LEOSA card along with any agency issued ID card, and will aderstand and abide by any state firearms restrictions? Yes No
o you understand that your LEOSA certification expires twelve (12) months from the qualification date on e back of the card, and that it's in accordance with H.R. 218? Do you understand that it is your responsibility maintain the qualification every twelve (12) months? Yes No
ased on the statements listed above, PBSO has the authority to deny any individual the right to qualify for .R. 218. (Please Initial)
do hereby declare and affirm under penalties of perjury that the contents of this application are true and correct of the best of my knowledge, information, and belief, and I so indicate by signing below. I understand by signing his form, I agree to allow the Palm Beach Sheriff's Office to conduct a criminal history check as part of this pplication process.
pplicant Signature Date
Criminal History Check Completed on
Commander of Training Authorization Date