



PEACE OFFICER IDENTIFICATION (ID) CARD REQUEST AND AUTHORIZATION

Name (Last, First, MI)		Date of birth	Eye color	Height
Job title		Work location		Special assignment, if applicable

Signature Date

AUTHORIZATION

Per Department policy and RCW 10.93.020, the above named employee:

1. Is Is not A full-time, fully compensated officer of the Department.
2. Is Is not Empowered by the Department to detect or apprehend violators of the laws in some or all of the limited subject areas for which the Department is responsible.

Per RCW 9.41.060 and 9.41.300, the above named employee:

3. Has Has not Completed Department firearms training and is subject to annual criminal background checks.

NOTE: "Is" must be checked for both 1. and 2. to be eligible for a Peace Officer ID Card. The response for 3. does not determine eligibility but will be used to determine language that appears on the card.

Appointing Authority Signature Date

The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14. Upon completion, the data classification category may change.

Distribution: **ORIGINAL** - ID card custodian **COPY** - Personnel file