Texas District & County Attorneys Association Professional Criminal Investigator APPLICATION FORM

(SEE DEADLINE INFORMATION ON LAST PAGE OF APPLICATION)

I.	Legal Name of Applicant:			
	Last	First		M.I.
II.	Date of Birth:	_		
	Place of Birth:	State		County
III.	Oity	Olaic	•	County
	Social Security Number	Drive	er's License Nun	nber
IV.	Date Hired:	Posi	tion:	
V.	Home Address:Street	City	State	Zip
	Telephone:()	-	Olale	Ζip
VI.	Employing Agency			
/II.	Agency Head (Print or Type)			
ΊΙΙ.	Office Address:	City	State	Zip
	Office Telephone: ()	•	State	Ζip
IX.	STANDARDS FOR CERTIFICATOR BE FILLED OUT BY ELECT			ber 18, 2007.)
Χ.	Applicant Current TCOLE Certific	cate level		
XI.	TCOLE P.I.D. #			
	Check appropriate box. Explain	all "NO" answers	on a separate pa	ge.

		YES	NO
Α	Applicant is a TCOLE licensed/certified Officer and has been		
	employed FULL time by an Elected County/ District/or Criminal		
	District Attorney as a(n) Investigator/Criminal Investigator with the		
	following years of service: A minimum of eight (8) years full time		
	employment if holding an Advanced Certificate with TCOLE or five		
	(5) years full time employment if holding a Masters Certificate with		
	TCOLE. Attach copy of appropriate TCOLE license. The years of		
	service may be accumulated with any County, District, or		
	Criminal District Attorney's office.		
B.	Applicant is a current member in good standing of the Investigator's		
	section of TDCAA		

C.	Applicant is employed, full time, by the undersigned as a(n)		
	Investigator/Criminal Investigator and is not involved in any outside		
	investigative work.		
D.	Applicant shall be allowed to attend the TDCAA Investigator's		
	Conference each year, or obtain the equivalent number of hours in		
	other courses certified by TDCAA and approved by TCOLE		
	training credits		

Professional Criminal Investigator's Certificate

A. Applicant Requirements

- 1. All applicants must be recommended by the District, County, or Criminal District Attorney where he/she is a full-time employee.
- 2. All applicants must have received the following certificate with the appropriate years of service:

A minimum of eight (8) years **full time employment** with the appropriate elected prosecuting attorney if holding an Advanced Certificate with TCOLE or five (5) years **full time employment** with the appropriate elected prosecuting attorney if holding a Masters Certificate with TCLOLE. Attach copy of appropriate TCOLE license and employment documentation. **The years of service may be accumulated with any County, District, or Criminal District Attorney's office.**

B. Membership

- 1. All applicants must be current members of the Investigator Section of the Texas District and County Attorney's Association. *Failure to pay dues and attend TDCAA functions may be taken into consideration by the Review Committee.*
- 2. Applicants shall not be involved in any outside investigative work, such as accident investigations, divorce, bail bonds etc.

C. Experience

•	Experience
	Applicant must be a TCOLE licensed/certified Peace Officer and have for at least five (5) years, been employed full time by an elected prosecutor as an investigator or criminal investigator.
	dersigned Elected Prosecutor, hereby certify that the preceding information is correct to the best of my knowledge.
Date	Signature

_	E COMPLETED BY APPLICANT: mployment history with elected pro	esecutor offices:	
Please	9	nd sign below to signify agreement with the	
l.	a program which may be later discontinued or quire no vested rights therein.		
II.	II. I understand that the PCI certification is subject to recall or suspension by the PCI Review Committee subject to any violation of the rules and minimum standards which caused this certificate to be issued.		
III.		for the PCI Certificate which have been ertify that I am fully qualified for certification	
IV	. I agree to abide by all rules and reference to this certification as a	regulations promulgated by TDCAA with amended from time to time.	
V.		nterview, if necessary, before the Review e purpose of testing my qualifications for n of said certificate(s).	
	Date	Signature	
		Type name as it is to appear on Certificate	
	Please submit to: TDCAA ATTN: PCI Awards 505 W. 12 th St., Ste. 100 Austin, TX 78701	Nominations <u>must be postmarked no later than</u> July 1st, for the Annual Conference in September and December 1st for the February Investigator Conference. <u>Any nominations received after the deadlines</u> will be awarded at the next scheduled conference.	
	FOR OFFICE USE ONLY Application # Date Filed:		