

Chief Administrative Officer

## Utah Peace Officer Standards and Training Portal Authorization Form

This form is to be completed and signed by the Chief Administrative Officer to allow a person agency level access to POST records system.

Fax this request to 801-396-7068

erson To	Be Granted Access:			POST ID:
gency			Date	
rst Name		Middle Initial	Last Name	
mail:			Phone	
nief Admin	strative Officer E-mail Address			
elect Aco	cess Levels That Apply:			
	ate Agency Information ate agency point of conta		OST directory.	
	uthorize		,	
	v Agency Training Recor and Print Training & Certi		ividuals employ	ed with your agency.
$\Box$ A	uthorize			
<b>POS</b> Regis	T Course Registration ster any active sworn office	er or dispatcher for POST	sponsored cours	ses.
$\Box$ A	uthorize			
	ort Training Hours nit to POST, approved co	urses or summary trainir	g hours to mee	et training requirement.
$\Box$ A	uthorize			
Requ	mit Employment Action lest an individual be certifi nge an individual's certific	ed by your agency as a pe	ace officer or di n End of Emplo	spatcher. yment Action.
$\Box$ A	uthorize			
This for print ce	ual Access m is only for agency level acceptifications, register for cour toward towar		•	dispatcher to view own record
	y authorize the access levels se ation on behalf of my agency in ed.	•		•

Date