



DCS Operations Center
 15750 IH 10 W
 San Antonio TX 78249

U. S. ARMY QUALIFIED RETIRED LAW ENFORCEMENT OFFICERS SAFETY ACT APPLICATION

PART 1

LAW ENFORCEMENT OFFICERS SAFETY ACT APPLICATION NOTICE

In order for Defense Consulting Services (DCS) to process your application, the following Personally Identifiable Information (PII) and Sensitive Personally Identifiable Information (SPII) is required.

1. Applicant full name. (PII)
 2. Applicant telephone number. (Not PII)
 3. Applicant email address. (PII)
 4. Residential address. (PII)
 5. Social Security Number. (SPII)
 6. Copy of driver's license or government identification with photograph. **Photo copying a government issued Common Access Card (CAC) is prohibited by law.** (SPII)
 7. Notarized completed LEOSA Credential application. (SPII)
 8. Physical passport photo (**photo background must be white/off-white**). (NotPII)
 9. Biometrics: Fingerprints to conduct a criminal background check [See pages 7-9 for instructions; send fingerprint cards directly to a FBI processing facility or provide live-scan/digital prints to a FBI Channeler]. (SPII)
- NOTE: The FBI Identity History Summary processing fee is not included in the LEOSA Application fee. The FBI Identity History Summary must be purchased separately (See pages 7-9.)**
10. Copy of DD Form 214/*Certificate of Release or Discharge From Active Duty*, NGB Form 22/*National Guard Report of Separation and Record of Service*, or any other official documentation to validate military service requirements (i.e., awards, decorations, official orders, performance reports etc.). (SPII)
 11. **MEDICALLY RETIRED APPLICANTS ONLY.** Medical Declaration of Physical Competency signed and "STAMPED" by DoD affiliated physician (Tricare, Veterans Administration, Military Treatment Facility Physician). Please do not modify the declaration or send documents which may be a violation of the Health Insurance Portability and Accountability Act (HIPAA) of 1996.

WEAPONS QUALIFICATION NOTICE

RETIRED LEOSA APPLICANTS ARE NOT REQUIRED TO HAVE A CURRENT WEAPONS QUALIFICATION PRIOR TO APPLYING FOR THE CREDENTIAL

CONTACT INFORMATION

DCS Contact Information

DCS Ops Center Contact Information	Defense Consulting Services, LLC 15750 IH 10 W San Antonio TX 78249 (866) 384-3570, Opt 5
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USA LEOSA Customer Service Project Manager Contact Information

Fort Leonard Wood, MO	Commercial: 573-563-7243 FAX: 573-596-0131, Ext 3-8123
LEOSA Dedicated Questions Email Address	general.army@defenseconsultingservice.com

**U. S. ARMY QUALIFIED RETIRED LAW ENFORCEMENT OFFICERS SAFETY ACT APPLICATION
PART 2
APPLICATION PROCESSING INSTRUCTIONS**

REQUIREMENT	926C RETIRED
Physical passport photograph as defined by the Department of State for all U.S. passports. NOTE: Photograph must be taken within 6 months of application submission date	X
Medical Declaration of Physical Competency is only required for applicants who were medically retired NOTE: The Medical Declaration of Physical Competency MUST be signed and "STAMPED" by a DoD affiliated primary care physician; DO NOT modify the information contained in the declaration or send documents which may be a violation of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 information	X
Copy of driver's license or government identification with photograph NOTE: Title 18, U.S. Code Part I, Chapter 33, Section 701, photocopying a government Common Access Card (CAC) is prohibited by law.	X
DD Form 214/ <i>Certificate of Release or Discharge From Active Duty</i> (member copy 2, 3, or 4) or NGB Form 22/ <i>National Guard Report of Separation and Record of Service</i> (member copy 2, 3, or 4), Standard Form 50 or any other supporting documentation (i.e., awards, decorations, official orders, performance reports etc.) NOTE: These documents must show upon retirement or separation the member had statutory powers of arrest or apprehension under Section 807(b) of Title 10, United States Code (Article 7(b), of the Uniform Code of Military Justice). This information can be validated through Military Occupational Specialties (MOS): Criminal Investigation Special Agent/31D, Military Police/31B, Military Police Officer/31O or Department of the Army Police Officer/0083.	X
Notarized completed LEOSA Credential application (where appropriate sign and date). NOTE: Return pages 3-6 only.	X
Make electronic payment via PayPal in the amount of \$165 or mail in cashier's check or money order in the amount of \$160. DCS Does not accept personal checks. NOTE 1: The FBI Identity History Summary processing fee is not included in the LEOSA Application fee. The FBI Identity History Summary must be purchased separately (See pages 7-9.) NOTE 2: All processing fees are nonrefundable!	X
Results of your FBI "Identity History Summary" (Criminal History Background Check). NOTE 1: When using a Channeler (Option 1 on the application) ensure you are requesting a " PERSONAL COPY OF YOUR OWN FBI BACKGROUND CHECK ; you are entitled by law." Upon receiving the results, you may: include a copy with your LEOSA application or send via email to general.army@defenseconsultingservice.com NOTE 2: If applicants use any of the following terminology "Concealed License, LEOSA, LEVEL II, or LEVEL III", etc. the Channeler will not assist you.	X

APPLICATION PROCESSING INSTRUCTIONS:

Step 1: Create login and password at <http://www.leosaonline.com/>

Step 2: Make electronic LEOSA Application processing fee payment via PayPal in the amount of \$165 (includes a \$5.00 PayPal processing fee) or mail in cashier's check or money order in the amount of \$160 (application processing fee only). DCS does not accept personal checks. **All processing fees are nonrefundable!**

Step 3: Mail application package to: Defense Consulting Services, LLC
15750 IH 10 W
San Antonio, Texas 78249



Capable... Competent... Credible...

DCS Operations Center
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U. S. ARMY QUALIFIED RETIRED LAW ENFORCEMENT OFFICERS SAFETY ACT APPLICATION

PART 3
PRIVACY ACT STATEMENT

I _____ [print name] authorize release of my personal information to Defense Consulting Services, LLC which is protected under the Privacy Act of 1974.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct, and I am the person named above (requester) and I understand any falsification of this statement is punishable under the provisions of Title 18, U.S.C. Section 1001 by a fine of not more than \$10,000.00 or by imprisonment of not more than five years or both, and that requesting or obtaining any record(s) under false pretenses is punishable under the provisions of Title 5, U.S.C. Section 552a(i)(3) by a fine of not more than \$5,000.00.

PRINCIPAL PURPOSES(S): To obtain information for the purpose of validating the identity of the applicant and review of criminal history summary for the issuance of a Law Enforcement Officers Safety Act (LEOSA) Credential in accordance with DoDI 5525.12/Implementation of the Amended Law Enforcement Officers Safety Act of 2004, DODI 5525.15/Law Enforcement (LE) Standards and Training in the DoD, Army Directive 2015-03/Procedures for the Issuance of Law Enforcement Officers Safety Act Credentials to Army Law Enforcement Officers. Your PII and SPII is solicited solely for creating files and updating Department of Defense Information Systems.

Name	Last	First	Middle
Date of Birth	(MM / DD / YYYY) (/ /)		
Residential Address (To Be Used On Credential)	Street Address:		
	City:	State:	Zip Code:
State of Residence			
Social Security Number			
Home Phone	Home: ()	Cell: ()	
Mailing Address (If Different From Residential Address)	Street Address:		
	City:	State:	Zip Code:
DoD Component	USA-REG Army	USA-NGB	USA-RES Civilian Police/0083
Qualified Law Enforcement Officer (QLEO) AIT Graduation date: _____ BOLC Graduation date: _____ USACPA/USCPA Graduation date: _____ CID Special Agent Course Name/Graduation date: _____	a) Retired with ten (10) years of service in applicable MOS: After graduating from appropriate formal training course; validated via DD Form 214 (Members Copy 2, 3, or 4), NGB 22, or other official supporting documentation. b) Medically retired with ten (10) years of service in applicable MOS: Medical retirement date validated via DD Form 214 (Member Copy 2, 3, or 4), NGB 22, (Member Copy 2, 3, or 4), Standard Form 50 or other official supporting documentation validating appropriate MOS.		
Personal Email address GOVERNMENT EMAIL ADDRESS PROHIBITED			



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PART 4

FBI IDENTITY HISTORY SUMMARY/CRIMINAL HISTORY BACKGROUND CHECK RESULTS

DISCLOSURE: Fingerprints are for all personnel who are requesting the Law Enforcement Officer Safety Act Credential. Failure to provide the information will result in a denial of your application. However, neither your answers nor information or evidence gained by reason of your answers can be used against you in any criminal prosecution for a violation of Title 18, United States Code, Section 922(g)(9), including (military only) prosecutions under the Uniform Code of Military Justice, based on a violation of Section 922(g)(9), for conduct which occurred prior to the completion of this form. The answers you furnish and any information resulting therefrom, however, may be used against you in a criminal or administrative proceeding if you knowingly and willfully provide false statements or information.

Signature of applicant: _____ Date: _____

PART 5 – SECTION 1

QUALIFIED RETIRED LAW ENFORCEMENT OFFICER QUESTIONNAIRE

Applicants must answer all the questions below to meet the requirements for a 926C LEOSA Credential.

QUESTION	YES	NO
Are you or have you been under indictment for a crime punishable for a term exceeding one year?		
Are you or have you been a fugitive from justice?		
Are you a user of or addicted to marijuana or any depressant, stimulant, narcotic drug, or any other controlled substance?		
Have you been adjudicated mentally defective which includes a determination by a court, board, or other authority that you are a danger to yourself or to others or incompetent to manage your own?		
Have you been committed to a mental institution?		
Are you an undocumented immigrant in the United States?		
Have you ever been discharged from the Armed Forces under dishonorable conditions?		
Have you ever renounced your United States citizenship?		
Are you subject to a court order restraining you from harassing, stalking or threatening an intimate partner of such person or child of such intimate partner of person or engaging in other conduct that would place an intimate partner in reasonable fear of bodily injury to the partner or child?		
Have you ever been convicted in any court of a misdemeanor crime of domestic violence?		
Are you or have you been incarcerated in a federal or non-federal institution?		
Are you currently on parole, annual report status, or serving a term of mandatory supervision?		

CERTIFICATION: I hereby certify that, to the best of my knowledge and belief, all of the information provided by me is true, correct, complete, and made in good faith. I understand that false or fraudulent information provided herein may be grounds for criminal and/or administrative proceedings, to include (if civilian) adverse action, up to and including removal, and (if military) disciplinary action under the Uniform Code of Military Justice.

Signature of applicant: _____ Date: _____



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**U. S. ARMY QUALIFIED RETIRED LAW ENFORCEMENT OFFICERS SAFETY ACT APPLICATION
PART 5 - SECTION 2
QUALIFIED RETIRED LAW ENFORCEMENT OFFICER QUESTIONNAIRE**

Applicants must answer all the questions below to meet the requirements for a 926C LEOSA Credential.

QUESTION	YES	NO
Were you retired in good standing from service with the United States Army, Army National Guard, or Army Reserve component as a law enforcement officer?		
Before separating did you have statutory powers of arrest or authority to apprehend pursuant to section 807(b) of Title 10, United States Code (also known as article 7(b) of the Uniform Code of Military Justice)?		
Before separation (1) did you serve as a law enforcement officer for an aggregate of ten (10) years or more, or (2) retired from service with a United States Army, Army National Guard, or Army Reserve component after completing any applicable probationary period of service due to a service-connected disability as determined by that component?		
Do you agree that while armed, you will not be under the influence of alcohol or another intoxicating or hallucinatory drug or substance?		
Do you agree that you will have in your possession the LEOSA Credential and current state firearms qualification document signed by certified firearms instructor at all times while in possession of a concealed firearm?		
Do you understand the term "firearm" does not include—(1) any machinegun (as defined in Section 5845 of the National Firearms Act); (2) any firearm silencer (as defined in Section 921 of this title); and (3) any destructive device (as defined in Section 921 of this title)?		
Do you understand that if at any time you are under the influence of alcohol or another intoxicating or hallucinatory drug or substance you are not considered a qualified law enforcement officer and cannot carry a concealed weapon under the provisions of the LEOSA?		
Did you read and do you understand Sections 926C of Title 18, United States Code; the incorporation implementation of Section 1089 of Public Law 112-239 for military and civilian law enforcement personnel within the DoD?		
Did you read and do you understand the information contained in DoDI 5525.12/ <i>Implementation of the Amended Law Enforcement Officers Safety Act of 2004</i> ?		
Did you read and do you understand the information contained in DODI 5525.15/ <i>Law Enforcement (LE) Standards and Training in the DoD</i> ?		
Did you read and do you understand the information contained in Army Directive 2015-03/ <i>Procedures for the Issuance of Law Enforcement Officers Safety Act Credentials to Army Law Enforcement Officers</i> ?		
Do you understand the rules and regulations regarding privately owned weapons on government property, installations, buildings, bases, or parks?		
Do you understand the rules and regulations regarding privately owned weapons of the state in which you reside can permit private persons or entities to prohibit or restrict the possession of concealed firearms on their property (such as bars, private clubs, amusement parks, etc.)?		

Signature of applicant: _____ Date: _____



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**U. S. ARMY QUALIFIED RETIRED LAW ENFORCEMENT OFFICERS SAFETY ACT APPLICATION
 PART 5 – SECTION 3
 QUALIFIED RETIRED LAW ENFORCEMENT OFFICER QUESTIONNAIRE**

Applicants must answer all the questions below to meet the requirements for a 926C LEOSA Credential.

QUESTION	YES	NO
Have you been officially found by a qualified medical professional employed by the United States Army, Army National Guard, or Army Reserve component to be unqualified for reasons of mental health?		
Have you entered into an agreement with the United States Army, Army National Guard, or Army Reserve component from which you retired from service that you are not qualified under USC Title 18 Section 926C for reasons relating to mental health and for those reasons?		
Are you prohibited by federal law from receiving a firearm?		

Signature of applicant: _____ Date: _____

**PART 6
 AFFIDAVIT**

Before me, the undersigned notary public, this day, personally, appeared [Affiant full name] _____, to me known, who being duly sworn according to law, deposes the following: Being first duly sworn or affirm on oath according to law, deposes and says that [he/she] has read the foregoing AFFIDAVIT OF The Law Enforcement Officer Safety (LEOSA) Credential Application [full name/object] by [his/her] subscribed, that the matters stated herein are true to the best of [his/her] information, knowledge and belief.

[Affiant Signature] _____

State of [_____] County of [_____]

Subscribed and sworn to before me this _____ day of _____, 20_____.

My Commission Expires: _____

 Notary Public Signature Seal:

U. S. ARMY QUALIFIED RETIRED LAW ENFORCEMENT OFFICERS SAFETY ACT APPLICATION

PART 7

**FBI IDENTITY HISTORY SUMMARY/CRIMINAL HISTORY BACKGROUND CHECKS
FINGERPRINT APPLICATION INSTRUCTIONS**

OPTION 1

"Recommended" If Available In Your Area

Submitting an Identity History Summary Request to the FBI Using FBI-Approved "Channelers"

Average Immediate - 10 Day Summary Return

List of FBI-approved Channelers can be found at www.fbi.gov. Follow the instructions: Under "About Us" Click "Criminal Justice Information Services".

FBI-approved Channelers receive the fingerprint submission and relevant data, collect the associated fee(s), electronically forward the fingerprint submission with the necessary information to the FBI CJIS Division for a national Identity History Summary check, and receive the electronic summary check result for dissemination to the individual. An FBI-approved Channeler simply helps expedite the delivery of Identity History Summary information on behalf of the FBI.

The process for making a request through an FBI-approved Channeler is consistent with FBI submission procedures. Please note that an FBI-approved Channeler may have different methods or processes for submissions. Furthermore, additional fees may apply for requests submitted through an FBI-approved Channeler. An individual requesting an Identity History Summary or proof that a summary does not exist through FBI-approved Channelers should contact the Channeler directly for complete information and instructions.

Note: Please review the information below regarding the use of FBI-approved Channelers:

- An FBI-approved Channeler may only process requests for a U.S. person (an individual who is a citizen of the U.S. or a lawful permanent resident of the U.S.). A lawful permanent resident is any person not a citizen of the U.S. who is residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant (also known "Permanent Resident Alien," "Resident Alien Permit Holder," and "Green Card Holder").
- If an authentication (apostle) is needed, contact the Channeler to determine if this service is provided.
- An FBI-approved Channeler cannot process a request for employment and/or licensing purposes within the United States. This type of request should be coordinated with the appropriate state identification bureau (or state police) for the correct procedures.

NOTE: Upon receiving the results you may: include a copy with your LEOSA application or send via email to general.army@defenseconsultingservice.com

**U. S. ARMY QUALIFIED RETIRED LAW ENFORCEMENT OFFICERS SAFETY ACT APPLICATION
PART 7 (CONTINUED)
FBI IDENTITY HISTORY SUMMARY/CRIMINAL HISTORY BACKGROUND CHECKS
FINGERPRINT APPLICATION INSTRUCTIONS**

OPTION 2

Average 12-15 Week Summary Return

Submitting an Identity History Summary Request to the FBI

Step 1: Complete the Applicant Information Form.

- If the request is for a couple, family, etc., all persons must sign the form.
- Include your complete mailing address. Please provide your telephone number and/or e-mail address, if available.

Note: Due to automation of the mail process, tentatively scheduled for January 12, 2015, the FBI will no longer provide Identity History Summary results on blue security paper. All responses will be processed on standard white paper. Additionally, the FBI will no longer accept return self-addressed envelopes with Departmental Order requests. This includes pre-paid Priority Mail, FedEx account numbers, United Parcel Service, etc., foreign postage coupons, and requests to forward correspondence to the Department of State for the apostille process. Envelopes received will be destroyed. The FBI will return all results, both foreign and domestic, by First-Class Mail via the U.S. Postal Service. Thank you for your patience as we try to streamline our processes to improve our service to you.

Step 2: Obtain a set of your fingerprints.

- Provide the original fingerprint card. Previously processed cards or copies will not be accepted.
- Your name and date of birth **must be** provided on the fingerprint card. Fingerprints should be placed on a standard fingerprint form (FD-258) commonly used for applicant or law enforcement purposes. The FBI will accept FD-258 fingerprint cards on standard white paper stock.
- Include rolled impressions of all 10 fingerprints and impressions of all 10 fingerprints taken simultaneously (these are sometimes referred to as plain or flat impressions).
- If possible, have your fingerprints taken by a fingerprinting technician. This service may be available at a law enforcement agency.
- Fingerprints taken with ink or via live scan are acceptable.
- To ensure the most legible prints possible, refer to the Recording Legible Fingerprints brochure. If fingerprints are not legible, the fingerprint card will be rejected. This could cause delays in processing and could also result in additional fees.

Note: The name on your response letter will match the name indicated on the fingerprint card. Also, if the last four digits of your social security number is needed on your response letter, then please ensure your full nine-digit social security number is on the fingerprint card when submitting your request.

Step 3: Submit payment.

- Option 1: Pay by credit card using the Credit Card Payment Form. **Don't forget to include the expiration date of the credit card that you are using.**
- Option 2: Obtain a money order or certified check for \$18 U.S. dollars made payable to the Treasury of the United States. Please be sure to sign where required.
- **Important note:** Cash, personal checks, or business checks WILL NOT be accepted and sending any of these will delay processing of your request.



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**U. S. ARMY QUALIFIED RETIRED LAW ENFORCEMENT OFFICERS SAFETY ACT APPLICATION
 PART 7 (CONTINUED)
 FBI IDENTITY HISTORY SUMMARY/CRIMINAL HISTORY BACKGROUND CHECKS**

- Payment must be for the exact amount.
- If the request is for a couple, family, etc., include \$18 for each person.
- If the request is for multiple copies per person, include \$18 for each copy requested.
- The FBI will not accept additional payment to expedite your request.

Step 4: Review the Identity History Summary Request Checklist to ensure that you have included everything needed to process your request.

Step 5: Mail the required items listed above—signed applicant information form, fingerprint card, and payment of \$18 U.S. dollars for each person or copy requested—to the following address:

**FBI CJIS Division – Summary Request
 1000 Custer Hollow Road
 Clarksburg, WV 26306**

FINGERPRINT APPLICATION INSTRUCTIONS

Applicant Information Form Instructions	
a) Applicant Information: self-explanatory b) Applicant Home Address: self-explanatory c) Mail Results: your personal mailing address d) Payment Enclosed: self-explanatory, if paying by credit card complete the " <u>Credit Card Form</u> "	e) Reason for Request: check " <i>Personal Review</i> " f) Applicant Signature: self-explanatory g) Follow mailing instructions on bottom of " <u>Applicant Information Form</u> "