

CRIMINAL JUSTICE EDUCATION AND TRAINING STANDARDS COMMISSION

CRIMINAL JUSTICE STANDARDS DIVISION

POST OFFICE DRAWER 149, RALEIGH, NC 27602

TELEPHONE: (919) 661-5980



Form F-5B
(Rev. 02-2026)

AFFIDAVIT OF SEPARATION

Instructions

Please Type or Print all information clearly. This Form shall be completed for each separation from a certified position. The report must be submitted to the Commission **NO LATER THAN 10 DAYS after FINAL SEPARATION**. A copy of this form must be retained in the Agency's personnel file. **THIS FORM MUST BE COMPLETED IN ITS ENTIRETY.**

Separating Agency: _____

Address: _____
Street Address/PO Box City Zip Code

Separated Officer's Name: _____
First Middle Last

Home Address: _____

Cell Phone Number: _____ Date of Birth: _____

Last 4 Digits of SSN: _____ Acadis ID: _____

Date of Oath of Office: _____ Length of Service: _____

Status: Full Time Part Time Date of Final Separation: _____

Reason for Separation

Death	Resignation	Dismissal	Retirement	Other*
*Other (Explain) _____				
Answer the questions below:				
Is this agency aware of any allegation(s) in the past 18 months concerning potential criminal action or potential misconduct by the officer? Yes No				
If yes, have any criminal charges been filed? Yes No				
Is this agency aware of any substantiated allegation(s) of untruthfulness regarding this officer? Yes No				
If you answered "Yes" to any of the question(s) above, you must provide a detailed explanation on page 2.				

NOTE: To the extent that confidential information as defined by G.S. 153A-98, 160A-168, or 126-24 is maintained in the personnel file of any law enforcement agency or entity maintaining records of a law enforcement agency that employed the applicant, that information shall remain confidential in the files of the Criminal Justice Standards Division.

