

# CRIMINAL JUSTICE EDUCATION & TRAINING STANDARDS COMMISSION



## Criminal Justice Standards Division

Post Office Drawer 149, Raleigh, NC 27602

(919) 661-5980

NCPLE@ncdoj.gov

CP-201  
(Rev. 11-2024)

## Application for Campus Police Agency Certification

The undersigned applicant hereby applies to the North Carolina Attorney General's Office for Company Police Agency Certification under the provisions of Chapter 74-G of the North Carolina General Statutes and Title 12, Chapter 2J of the North Carolina Administrative Code. In support of said application, the undersigned makes the representations contained herein with the understanding that any omissions, inaccuracies or failure to make full disclosures may be deemed sufficient reason to deny certification, withhold renewal or suspend/revoke agency certification. The applicant understands that the Campus Police Administrator may make such inquiry and investigation concerning the applicant's character, record and background as deemed proper. Said applicant further agrees to furnish any additional information as requested by the Campus Police Administrator.

### THE REQUIRED FEE FOR COMPANY POLICE AGENCY CERTIFICATION IS \$250.00

You will receive an Invoice on the ACADIS Portal once your Application has been received.

The Fee MUST be submitted via the ACADIS Portal in order for the application to be processed.

**INSTRUCTIONS:** Please TYPE or PRINT all information clearly. Attach all required documentation to application and submit to Campus Police Administrator for review.

Name of Agency/Firm: \_\_\_\_\_

Agency/Firm Location: \_\_\_\_\_ County: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
*Street Address/PO Box* *City* *State/Zip*

Business Phone Number: \_\_\_\_\_

Name of Department Head: \_\_\_\_\_

Applicant Name: \_\_\_\_\_  
*First* *Middle* *Last*

Applicant's Job Title: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_  
*Street Address/Apt No.* *City* *State/Zip*

Email Address: \_\_\_\_\_

Is applicant the sole owner of agency/firm?  Yes  No

If "No", indicate names, addresses, phone numbers and titles of all board members and president(s) associated with the college. (Attach additional sheets if necessary.)

If Yes, how long has agency/firm been established as a sole proprietorship, partnership, corporation?

\_\_\_\_\_

Has applicant ever been arrested?  Yes  No  
*If "Yes", attach a separate sheet giving complete details and results.*

Are there any unpaid judgments of debt now outstanding against the applicant?  Yes  No  
*If "Yes", attach a separate statement giving complete details.*

Is your company police agency/firm currently contracted with another corporation or business entity to provide private police services?  Yes  No  
*If "Yes", please attach a separate sheet that lists names, addresses, and phone numbers for each.*

**APPLICATIONS MUST BE ACCOMPANIED BY:**

1. Agency originating documentation which specifies the agency's law enforcement functions.
2. A copy of the campus agency's insurance policy, or if self-insured, the certificate of self-insurance(applicable to non-public entities only).
3. Statements indicating the results of a criminal history records check of each agent/board member of the public or private entity, through the clerk of superior court in each county where the individual resided or maintained a residence or place of business over a five year period prior to such application.
4. If application is NOT signed by the Chairman of the Board for College, the person authorized to sign application must have letter (attach to application) signed by the Chairman and board members authorizing the individual to submit application with a copy of the resolution from the board requesting such action.
5. The appropriate application fee (\$250.00) submitted via the ACADIS Portal.

**Applications that do not include this information will NOT be accepted.**

**This affidavit to be executed by applicant before a notary public:**

As the applicant for Campus Police Agency Certification, I attest that I have read and am familiar with the regulations provided for in G.S. 74G – The Campus Police Act and 12 NCAC 2J of the North Carolina Administrative Code. *I further understand and agree that any omission, falsification, or misrepresentation of any factor or portion of the required documentation can be the sole basis for denial, suspension, or revocation of agency certification at any time, now or later.*

Signature of Applicant/Authorized Representative \_\_\_\_\_

Driver License Number \_\_\_\_\_

Sworn and Subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

My Commission expires \_\_\_\_\_

Notary Public