

**PEACE OFFICER REQUEST FOR
PERSONAL RECORDS**

POST 2-366 (03/2023)

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INFORMATION PRIVACY ACT: Pursuant to the Federal Privacy Act (Public Law 93-579) and the Information Practices Act (IPA) of 1977 (Civil Code Sections 1798, et seq.), notice is hereby given for the request of personal information. Failure to provide any part of the requested information may delay processing of this application or result in an incomplete record. No disclosure of personal information will be made unless permissible under Article 6, Section 1798.24 of the IPA of 1977. Each individual for whom personal information is collected has the right to inspect that information in any record maintained by POST. Inquiries may be directed to the POST Information Practices Act Coordinator at the address listed above.

A. PROFILE INFORMATION

1. NAME ON PROFILE (FIRST, MIDDLE, LAST)		2. POST ID (OR SOCIAL SECURITY NUMBER)	3. BIRTH DATE (MM/DD/YYYY)
		-	SSN: - -
4. CURRENT OR MOST RECENT LAW ENFORCEMENT AGENCY OR DEPARTMENT			5. YEAR HIRED (YYYY)
6. BASIC ACADEMY (NAME OF PRESENTER)			7. YEAR COMPLETED (YYYY)

B. ATTESTATION OF REQUESTING INDIVIDUAL Check the applicable statement below and complete all items that apply (11 thru 18)

8. INDIVIDUAL REQUEST FOR PERSONAL PROFILE

Pursuant to Penal Code section 13510.9(e), I certify under penalty of perjury that I am the above-named individual:

- making a request for my own personal profile report.
- making a request for reasons for separation provided to POST by my former employing agencies.
- making a request for information regarding any allegations of serious misconduct, as defined in Commission Regulation 1205, made against me.

11. SIGNATURE OF REQUESTING INDIVIDUAL AND DATE (REQUIRED)		12. PRINT FULL NAME <i>(if different from item 1)</i>
▶ _____ DATE		13. TITLE
14. CONTACT NUMBER ()	15. EMAIL ADDRESS	16. AGENCY/DEPARTMENT <i>(if different from item 4)</i>
17. MAILING ADDRESS <i>(This will become the official address of record, if different from current POST records)</i>		
Street	City	ST Zip/s

C. REQUIRED IDENTIFYING INFORMATION

- Copy of Identification attached
Type of Identification Provided (Driver's License; Government Issued Identification Card; Local, State, or Federal Employee ID Card):

D. NOTARIZATION

Notarized By: _____ on _____
(Name of Notary Public) (Date)

Notary Public Number: _____

Unofficial unless stamped by Notary Public

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INSTRUCTIONS

Part A

- Boxes 1-7 must be completed.
- Box 2 may be either the requesting peace officer's POST ID OR Social Security Number. It is preferred that the requestor use their POST ID number.

Part B

- In Box 8, the requesting peace officer, must select which records they are requesting. More than one type of record may be selected.
- Boxes 11-17 must be completed.
- The address provided in Box 17 will become the requesting peace officer's official address of record (AOR) if different from the AOR that is currently on file with POST or the requesting peace officer's last employing agency.

Part C

- This form must be accompanied by a photocopy of the front and back of the requesting peace officer's government issued identification. The requesting peace officer may provide a copy of:
 - Driver's License;
 - Government Issued Identification Card;
 - Local Government Employee Identification Card;
 - State Government Employee Identification Card; or
 - Federal Government Employee Identification Card

Part D

- This form must be notarized by a licensed notary public.

Form Submission

- To submit your completed, signed, and notarized request: Go to NextRequest at <https://postca.nextrequest.com/> to submit a "Peace Officer Request for Personal Records." Include a copy of the notarized form and a copy of the front and back of your driver's license or other form of government issued identification. The notarization and copy of government issued identification is used for the protection of the requesting peace officer to ensure this information is not released to someone not authorized to possess it.