

## Montana Public Safety Officer Standards & Training Council

Website: dojmt.gov/post 2260 Sierra Road East Helena, MT 59602 Email: mtpost@mt.gov Phone: (406) 444-9975 Fax: (406) 444-9978

## NOTICE OF QUALIFICATIONS FOR RESERVE CERTIFICATE AND APPLICATION FOR AWARD OF RESERVE CERTIFICATE

§ 7-32-214, MCA

<u>Instructions</u>: The applicant must complete this form and forward it to his or her agency head/designee for endorsement. The agency should then forward the completed form and attachments to POST by emailing the form to the email address above. Alternatively, the information may also be sent to POST via mail at the address above. POST will notify the agency and the applicant of action taken.

Applicant Information	<u>on</u> :					
Name:			Agency Na	ame:		
Date of Birth:			Date Hire	d:		
Email Address:			Phone:			
The requirements fo	or the Reserve Certificate ar	<u>e</u> :				
1. You n	nust successfully complete t	he traini	ng outlined	in § 7-32-214, MC	CA;	
i.	Did you complete the trai	ning outl	ined in § 7-3	32-214, MCA?		
	Yes	No				
ii.	Training completion date:	·				
2. You n	nust be a reserve with your	current a	gency for o	ne full year;		
	Have you been a reserve	with your	current ag	ency for one year	or more?	
	Yes No					
3. You n	nust meet the definition of	a reserve	officer in §	7-32-201, MCA:		
i.	Have you been sworn?		Yes	No		
ii.	Are you part-time?	Yes	No	1		
iii.	Are you a volunteer? (Not	e volunte	ers cannot	be paid a wage)	Yes	No
iv.	If you are not a volunteer,	, are you	a court offi	cer, appointed by	a Chief of Po	olice?
	Yes	No				
4. You n	nust meet the residency req	uiremen	t of § 7-32-2	213, MCA.		
i.	Have vou been a resident	of Monta	ana for at le	east one vear?	Yes	No

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ii. Have you been a resident o	i the county in which	n you are a reserve for at leas	or six
months? Yes	No		
5. You must agree to abide by the Co	de of Ethics containe	ed in ARM 23.13.203.	
i. Do you agree to abide by th	ne public safety offic	ers' code of ethics?	
Yes	No		
*If you do not meet these requiremen	ıts, you <u>will not</u> be is	sued a Reserve Certificate.	
Applicant Certification: I attest that the information best of my knowledge.	ion contained on this	application is true and correc	t to the
Signature of Applicant	 Date		
unpaid volunteer, or a court officer appointed by a with this agency for at least one year, has agreed is worthy of this award. My opinion is based on per of this jurisdiction substantiate the recommendation of this jurisdiction substantiate the recommendation of this jurisdiction substantiate the recommendation of the printed Name of Agency Head/Designee	to abide by the code e ersonal knowledge of on.	of ethics, is of good moral cha	racter and
Email:	Phone:		
State of Montana			
County of	<del></del>		
Subscribed and sworn to before me this	day of	, 20	
Subscribed and sworn to before me this (SEAL)	day of Signature of Notary		
(SEAL)			

Rev. 02/2023