



**Georgia Peace Officer Standards & Training Council**  
**Application for Certification**  
**Arson Investigator**

Page  
1

**Demographic Data – Section I**

<b>Last Name</b>		<b>Social Sec#</b>	
<b>First Name</b>		<b>Date of Birth</b> (mm/dd/yyyy)	
<b>Middle Name</b>		<b>Suffix</b>	
<b>Race</b>	<b>Sex</b>		
<b>POST Certification or Registration#</b>	<b>Rank</b>		
<b>I have experience as an Arson Investigator for</b> (list total years & months)		<b>Years</b>	<b>Months</b>
<b>E-MAIL ADDRESS</b>		<b>Phone Number</b>	
<b>Employing Agency</b>			
<b>Agency Street Address</b>			
<b>City:</b>			<b>Zip Code</b>

**Education – Section II**

List the highest level of educational attainment. If you are a GA certified peace officer and your highest level is a high school diploma, you do not need to attach a copy of your diploma. Any diplomas for degrees must be attached.

<b>Highest Level of Education</b> (select one)	<b>Graduation Date of Highest level</b>
<b>College/University/School Name for Highest Level of Education</b>	

**Training – Section III**

<b>Name of School where <u>Basic Arson/Fire Investigation</u> Course was completed:</b>		
Location of School (City, State)	Length of Course (# of Hrs)	Date Training/School was Completed
<b>Name of School where <u>Advanced Arson/Fire Investigation</u> Course was completed:</b>		
Location of School (City, State)	Length of Course (# of Hrs)	Date Training/School was Completed

**Documentation – Section IV**

**Attach the documents listed below with this application.**

**Peace officer or Firefighter Certification**

**Course Completion Certificate - Basic Arson/Fire Investigation Course**

**Course Completion Certificate - Advanced Arson/Fire Investigation Course**



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**Attestation – Section V**

I hereby attest and affirm that the information contained herein is complete, true, and correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Supervisor/Employer Attestation – Section VI**

I hereby attest & affirm that this application is accurate and this applicant is recommended by me for certification as an Arson Investigator.

\_\_\_\_\_  
Print Title & Name of Agency Representative making request for Arson Investigator certification for this applicant.

\_\_\_\_\_  
Signature of Agency Head

\_\_\_\_\_  
Date

NOTARY PUBLIC

Sworn and subscribed before me this date.

\_\_\_\_\_  
Date

SEAL of NOTARY

My commission expires on :

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Signature of NOTARY PUBLIC or  
Ex. Off. J.P.)