



STATE OF TENNESSEE
PEACE OFFICER STANDARDS AND TRAINING COMMISSION
3025 LEBANON ROAD
NASHVILLE, TENNESSEE 37214-2217
PHONE: 615-741-4461 - FAX: 615-532-0502

Eight Month Waiver Request Form

Please complete before printing/submitting

Agency's name: _____

Agency's address: _____

Date of request: _____ Officer's PSID #: _____ Officer's DOB: _____

Officer's full legal name: _____

Date officer's employment ended: _____

Reason for separation: _____

Did officer complete required in-service training? (Y or N): _____ Hours Completed: _____

Printed name of Agency Head or General Departmental Instructor submitting request

Signature of Agency Head or General Departmental Instructor submitting request

This form should be completed on behalf of officers who did not complete eight (8) months of full-time law enforcement service for the year.
Do not complete if related to medical or military.