



ROBERT L. QUINN
COMMISSIONER

State of New Hampshire
DEPARTMENT OF SAFETY
OFFICE OF THE COMMISSIONER
JAMES HAYES BLDG., 33 HAZEN DRIVE, CONCORD, NH 03305

REQUEST FOR RAILROAD POLICE COMMISSION

I. TO BE FILLED OUT BY THE RAILROAD

Please Print Clearly or Type

Name of Railroad: _____

New Hampshire principle office location and each branch office: _____

Name: _____ Position/Title: _____

Work Address – Street: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ Email: _____

Applicant’s Job Title: _____

I hereby declare that the applicant listed herein is currently employed and in good standing with the above railroad. My signature below is evidence of my recommendation of the applicant for the commission of railroad police officer by the state of New Hampshire.

Signature: _____ Position: _____ Date: _____

II. TO BE FILLED OUT BY THE APPLICANT

NAME - Last: _____ First/MI: _____ DOB _____

Home Address – Street: _____

City: _____ State: _____ Zip: _____

Home Telephone: _____ Work Cell: _____

Please provide a resume or list on an attached piece of paper showing all prior work experience in active law enforcement, including employer’s name, address, telephone number and dates of service

Are you currently certified as a police officer, pursuant to NHRSA 106-L? Yes No
(If you have responded in the affirmative, please attach a copy of the certificate.)

I hereby declare and affirm, under penalties of unsworn falsification pursuant to NHRSA 641:3, that the contents of this application are true, correct to the best of my knowledge, and further, that there are no pending charges or conditions that would disqualify me from being commissioned as a railroad police officer.

Signature: _____ Date: _____

III. TO BE FILLED OUT BY POLICE STANDARDS AND TRAINING COUNCIL

I hereby declare that Police Standards and Training Council has reviewed the qualifications of _____ (applicant) and has determined that the individual has successfully completed such education and training as the Council determines for certification as a police officer in accordance with NHRSA 106-L:6.

Signature: _____ Position: _____ Date: _____