

SOUTH CAROLINA LAW ENFORCEMENT DIVISION



REQUIREMENTS FOR GROUP II STATE CONSTABLE

The attached forms and information must be submitted to the Regulatory Department before your request for a State Constables Commission can be processed.

- (1) Application must be completed and signed by applicant with all information requested including S.C. Voter Registration number and S.C. Driver's License number.
- (2) Release Form, Authorization for Release of Records, Judgment Statement Affidavit, and Possession of Firearms/Ammunition Affidavit must be signed by applicant and notarized.
- (3) State Constable Consent and Medical History
- (4) Report of State Constable Examination/Medical
- (5) If you are **NOT** planning to assist local law enforcement, please complete the Retired, Non-Working Form.
- (6) If you have retired under **DISABILITY**, please completed the Retired Under Disability Form.
- (7) Oath of office must be signed and notarized.
- (8) Color photograph taken within the last 3 months.
- (9) Documentation that you are a Retired Law Enforcement Officer. This documentation must be on the Police Officers Retirement letterhead **and** from the Budget and Control Board (i.e. copy of a check stub or correspondence on their letterhead).

If you have any questions, please call (803) 896-7015.

R-004

9/2011



An Accredited Law Enforcement Agency
P.O. Box 21398/ Columbia, South Carolina 29221-1398/ (803) 737-900/ Fax (803)
896-7041

SOUTH CAROLINA LAW ENFORCEMENT DIVISION



RETIRED, NOT ASSISTING LOCAL LAW ENFORCEMENT

I am applying for a state constable commission as a retired police officer and understand that since I have chosen to not complete the physical portion of this application, I will not be authorized to assist local law enforcement agencies in any manner. If, after receiving a State Constable Commission, I choose to start assisting local law enforcement, I understand that the physical portion of this application must be completed and submitted to SLED before authorization is given to any requesting agency.

Date

Signature

Date

Witness

Sworn to and subscribed before me this on this

_____ Day of _____ 20_____

Notary Public for South Carolina

My commission expires _____



P.O. Box 21398 / Columbia, South Carolina 29221-1398
(803) 737-9000 / Fax (803) 896-7048

SOUTH CAROLINA LAW ENFORCEMENT DIVISION



RETIRED UNDER DISABILITY

I am applying for a state constable commission as a retired police officer for reason of disability. I understand I am not authorized to assist local law enforcement agencies in any manner.

Date

Signature

Date

Witness

Sworn to and subscribed before me this on this

_____ Day of _____ 20 _____

Notary Public for South Carolina

My commission expires _____



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