

**TEXAS COMMISSION ON LAW ENFORCEMENT**

6330 E. Highway 290, STE. 200

Austin, Texas 78723-1035

Phone: (512) 936-7700

<http://www.tcole.texas.gov>

**PROFICIENCY ELIGIBILITY RESEARCH APPLICATION**

**Commission Rule §221.1**

**Non-refundable \$75 fee must be included.**

**Money order, agency or cashier's check.**

**APPLICANT'S PERSONAL INFORMATION**

1. TCOLE PID	2. Last Name	3. First Name.	4. M.I.	5. Suffix (Jr., etc.)
6. Date of Birth	7. Home or Permanent Mailing Address	8. City	9. State	
10. Zip Code	11. Phone Number (include area code)	12. E-mail		

**DEPARTMENT INFORMATION**

13. TCOLE Agency No.	14. Name of Agency	15. Mailing Address		
16. City	17. County	18. Zip Code	19. Phone Number	

Please provide a brief explanation of why you are requesting a proficiency certificate date change:

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221.1 (f) The issuance date of a proficiency certificate may be changed upon submission of an application along with documentation supporting the proposed date of eligibility and payment of any required fee.

I attest that I meet the requirements as prescribed by the rules of the Commission, and have completed and submitted a correct application. I understand that my request for a proficiency certificate date change may not be granted. I also understand that if this document is found to be false or untrue, any license or certificate issued to me by the Commission will be subject to revocation.

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

\_\_\_\_\_  
Date