

COUNCIL ON LAW ENFORCEMENT EDUCATION AND TRAINING

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Ada, OK 74820
Phone: (405) 239 - 5100

PRIVATE SECURITY CHANGE OF PERSONAL INFORMATION FORM

An incomplete form will not be accepted, and your file will not be updated.

Licensee Information

License #:		Last 4 SSN:	
Name (as it appears on license):			

New Information

Mailing Address:

City, State, Zip:

Physical Address:

City, State, Zip:

County:

Telephone #:

Email Address:

Does this include an address change for your agency? YES NO

If so, what is the agency name? _____

Signature:		Date:	
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For CLEET use only

Is individual also LE? YES NO If yes, copy to appropriate dept.

Processed by:		Date:	
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