



STATE OF NEVADA
COMMISSION ON PEACE OFFICER STANDARDS AND TRAINING
 5587 Wa Pai Shone Avenue Carson City, Nevada 89701
 (775) 687-7678 Fax (775) 687-4911

Request must be made at least **seven (7) business days before exam is to be taken and will only be scheduled Monday through Thursday - **NO FRIDAY TESTS**

Tests will only be scheduled between the hours of 7:00a.m. and 4:00 p.m.**

REQUEST FOR POST STATE CERTIFICATION EXAMINATION

Academy/Agency Name: _____

Academy/Agency Representative Requesting Exam: _____

Title: _____ Email: _____

Phone: _____

Not Reciprocity

Reciprocity = This employee meets all reciprocity requirements and I have verified the out of state certification and full time employment as a peace officer.

Exam Category (check the box below)	# of Students	Exam Date Requested Monday-Thursday ONLY	Requested Exam Time Window (i.e. 7am-4pm)
<input type="checkbox"/> Category I	_____	_____	_____
<input type="checkbox"/> Category II	_____	_____	_____
<input type="checkbox"/> Category III	_____	_____	_____
<input type="checkbox"/> Reserve	_____	_____	_____

Required Documents

1. An excel spreadsheet listing *only* those individuals taking the exam with their **POST ID#, full name, DOB, start and end date of academy completion and email address for each individual.** (An sample spreadsheet is available on the POST website under the FORMS tab.)
2. A complete copy of the **final basic academy schedule (not required for Reciprocity)**
3. All items must be attached to the email when this form is submitted.

NEW!!!!!! POST ID#'s and Email addresses now required on the roster will be used to set up an account in the new Acadis portal. Before the date of the test, an email will be sent to each individual on the roster. They MUST use the link in the email to set up an account in the portal before the day of the exam or they will not be eligible to take the exam and will have to be rescheduled. On the day of the exam, the user will access the state certification exam by logging into their portal account. (No additional password is required.)

Acknowledgement and Understanding

By submitting this request to the Peace Officer Standards and Training, you agree, to the best of your ability, to adhere to the following POST State Certification Exam requirement:

1. POST must be in receipt of the list of individuals taking the state certification exam.
2. Only peace officers meeting the criteria of successful completion of the academy/reciprocity training as listed in NAC 289.200(2) will be taking the certification examination.
3. All individuals will be taking the certification examination at the agency training site or other authorized agency facility under direct supervision.
4. Academy/Agency staff **MUST** administer, supervise and be present for the testing. NO individuals are permitted to take the certification examination on their own.
5. **NO PERSON(S) MAY ASSIST, COACH OR TAKE THE EXAM FOR ANOTHER PERSON.**

Comments: _____

Email to Kelly Engels: k.engels@post.state.nv.us

POST USE ONLY

Request Scheduled By: _____

Date and Time Testing Available: _____