

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

700 Hour Basic Law Enforcement Training Course APPLICATION INFORMATION AND PROCEDURES

\$275.00 NON-REFUNDABLE APPLICATION FEE MUST ACCOMPANY YOUR APPLICATION

The Missouri Sheriffs' Association Training Academy meets and exceeds the State of Missouri's minimum basic training requirement for peace officer licensure.

Minimum Qualifications for Applicants

- ❖ **Age Requirement:** Must be 20 years of age prior to start date of academy
- ❖ **Residency:** Must be a citizen of the United States
- ❖ **Education:** Documentary proof of high school education or presentation of a "State High School Equivalency" certificate
- ❖ **Arrest Record:** Must have no gross misconduct indicating inability to function as a peace officer
NO FELONY CONVICTIONS, S.I.S. (Suspended Imposition of Sentence) or S.E.S. (Suspended Execution of Sentence)
No misdemeanor convictions, S.I.S. or S.E.S. involving moral turpitude
- ❖ **Driver's License:** Must possess a valid Operator's License
- ❖ **Military:** Must have an "Honorable" discharge or "Under Honorable Conditions" discharge if having served in the military

Locations of Training

Camdenton	(Camden County)	700 – Hour	Class A License	Starts January
Jefferson City Part Time	(Cole County)	700 – Hour	Class A License	Starts August
Jefferson City Full Time	(Cole County)	700 – Hour	Class A License	Starts October
Platte City	(Platte County)	700 – Hour	Class A License	Starts August
Poplar Bluff	(Butler County)	700 – Hour	Class A License	Starts August
Reeds Spring	(Stone County)	700 – Hour	Class A License	Starts January
Salem	(Dent County)	700 – Hour	Class A License	Starts August
Union	(Franklin County)	700 – Hour	Class A License	Starts January
Waynesville	(Pulaski County)	700 – Hour	Class A License	Starts August
West Plains	(Howell County)	700 – Hour	Class A License	Starts August

<u>Tuition</u>	\$5,000 (\$4,000 – if sponsored & paid for by a Sheriff's Office)
<u>Processing & Application Fee</u>	\$275.00 (NON-REFUNDABLE)
<u>Criminal Background check fee</u>	\$40.50

Supplies List (not covered by tuition)

▪ **Uniform Requirements**

- Black BDU pants
- One (1) pair of black, minimum 6" waterproof tactical boots. BDU's will be tucked in the boots and bloused
- Running shoes
- Shorts / Athletic apparel

▪ **Firearms Training**

- ✓ Students are required to furnish their own handgun. Acceptable handguns are semi-automatic 9mm, 40 or 45. *The Academy will provide a handgun for those under 21 years of age.*
- ✓ Factory loaded pistol ammunition (NO RELOADS PERMITTED)
YOU WILL BE ADVISED OF QUANTITIES PRIOR TO FIREARMS TRAINING
- ✓ Full hearing and eye protection
 - All semi-automatic users must have four (4) low (10 rounds or less) capacity magazines or three (3) high (more than 10 rounds) capacity magazines
 - Holster
 - Duty belt
 - Handcuff case
 - Double Magazine Pouch

▪ **Practical Application Exercises**

Tactical Flashlight – Flashlight should have a minimum of 50 LUMS. Examples of models that would be acceptable: SureFire Models TL-2, NF-3, TL-3, 6P; Streamlight PolyTac Series; Smith & Wesson Delta Force Tactical flashlight. Flashlights may be obtained from Galls (www.galls.com), OMB Police Supply (www.ombexpress.com); Quartermaster (www.qmuniforms.com); local police supply shops, some gun shops and some sporting goods stores.

▪ **Classroom**

Highly recommended lap top computer (or have access to one) as some student course material will be provided on a USB flash drive

Steps for submitting your application

Step #1

Submit your completed application to the address below.

**Missouri Sheriffs' Association & Training Academy
6605 Business 50 West
Jefferson City, MO 65109-6307**

The following documents need to be included in your completed application packet

- a. A copy of your birth certificate
- b. A copy of your high school or college DIPLOMA, GED certificate or high school transcripts showing the school name and graduation date
- c. A copy of your DD214 if you were in the military
- d. Documentation showing change of name, if applicable (marriage license)
- e. Missouri Peace Officer License Legal Questionnaire & Authorization form (enclosed)
- f. Missouri Peace Officer License Application (enclosed)
- g. Check or money order for \$275.00 (non-refundable) payable to the Missouri Sheriffs' Association & Training Academy for the processing application fee (unless the class is cancelled, then a full refund will be made)
- h. A copy of your driver's license
- i. Missouri Sheriffs' Association applicant questionnaire (enclosed)

Step #2

Fingerprinting process is completed through IDEMIA. You will need to follow the fingerprinting instructions at the very bottom of this document

- a. **Your 4 digit Registration Number is 5989**
- b. You will be printing for a standard State **and** FBI search. **You must print for both.** The combined fee for this process is \$40.50.

Your prints MUST be taken before July 15 for August classes

Your prints MUST be taken before December 15 for January classes

Step #3

If approved, you will be notified of your acceptance to the Missouri Sheriffs' Association & Training Academy

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

BASIC TRAINING APPLICATION

Which location are you applying to? (please circle one)

Begins in August

Jefferson City (Part time) Platte City Poplar Bluff Salem Waynesville West Plains

Begins in January

Camdenton Reeds Spring Union

Begins in October

Jefferson City (Full time)

Please print all requested information legibly in **BLACK or BLUE** ink and submit it by mail to:

Missouri Sheriffs' Association Training Academy
6605 Business 50 West
Jefferson City, MO 65109

Applicant Contact Information

Date _____

Last Name	First Name	MI
Previous last names used (including maiden name)		

PLEASE INCLUDE A COPY OF DOCUMENTATION IF LAST NAMES ARE DIFFERENT

Social Security No
Age
Date of Birth
Email Address
Mailing Address
City, State, Zip
Home Phone No
Daytime Phone No
Cell Phone No

Person to Notify in Case of Emergency

Name
Relationship
Address
City, State, Zip
Home Phone No
Daytime Phone No
Cell Phone No

Education

(High School Graduation or GED Equivalency is Required)

High School			
City & State			
Did you graduate?	YES <input type="radio"/>	NO <input type="radio"/>	MONTH & YEAR

If you have a GED, please complete the following

Year Obtained
City & State

Please indicate below all colleges / universities previously attended (if applicable)

Name	State	Dates of Attendance	Major	Date Graduated

Employment

List all jobs you have had in the past five (5) years – BEGIN WITH THE CURRENT OR MOST RECENT

Employer	Type of Work	Dates	Reason for Leaving

Military / Driving / Arrest Records

- 1. Are you a veteran of military service? Yes No
If yes, please provide a copy of your DD214
- 2. Date of Discharge _____ Type _____
- 3. Do you have a valid driver’s license? Yes No
- 4. Has your driver’s license ever been suspended or revoked? Yes No
- 5. Have you ever been arrested for a felony? Yes No
- 6. Have you ever been arrested for a misdemeanor? Yes No
- 7. Have you ever been convicted of a felony, including the receiving of a Suspended Imposition of a Sentence following a plea of finding of guilty to a felony charge? Yes No
- 8. Have you ever been convicted of a misdemeanor involving moral turpitude? Yes No

If you answered “YES” to questions 5 through 8, please explain and provide COMPLETE CERTIFIED COPIES of investigative reports and court disposition documents.

By my signature below, certify that the information given herein is true and accurate to the best of my knowledge. I understand that any omission or falsification of the above information will disqualify me from attending the Missouri Sheriffs’ Association Training Academy.

Signature

Date

AUTHORIZATION TO RELEASE INFORMATION

I understand that the Missouri Sheriffs’ Association Training Academy will conduct, or cause to be conducted, a law enforcement records inquiry to learn of any criminal record data pertaining to myself. I hereby authorize this inquiry, and the release of such information to the Missouri Sheriffs’ Association Training Academy.

Signature

Date

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY
AUTHORIZATION FOR RELEASE OF INFORMATION

To Whom It May Concern:

I, (print your name) _____, hereby authorize you to release any and all information regarding my employment, credit, arrest and conviction record, and any other information whether personal or otherwise, that may be on my records to the:

Missouri Sheriffs' Association Training Academy
6605 Business 50 West
Jefferson City, MO 65109-6307

I further release you from all liability for releasing such information.

PLEASE PRINT THE FOLLOWING INFORMATION

Name _____

Address _____

City, State Zip _____

Driver's License No _____

Social Security No _____

Date of Birth _____

Place of Birth _____

Sex _____

Race _____

Height _____

Weight _____

Eye Color _____

Hair Color _____

Polo Shirt Size _____

I sign this agreement voluntarily.

Signature

Date

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY WAIVER

Release of All Liability and Assumption of Risk

1. I hereby waive, release and forever discharge the Missouri Sheriffs' Association Training Academy, its agents, representatives, heirs, executors, administrators, successors and assigns, of and from any and all claims, demands, rights and causes of action rising from any and all foreseen losses or diminished value to personal property such as, but not limited to, firearms, accessories and clothing and any and all physical and/or mental injuries sustained by me during all self-defense, physical, role playing, firearms or other training activities held by me during the Academy held on _____ through _____. This agreement is legally binding upon me, my heirs, executors, administrators and assigns.

2. In signing this release, I assert that:
 - a. I am presently in good physical and mental health
 - b. I am capable of strenuous physical activity
 - c. I am fully aware of, acknowledge and assume all risk of injury during my participation in this training
 - d. I have read and fully understand the terms and conditions of this agreement and sign it voluntarily

Print Name _____

Signature _____

Date _____

Witness _____
(can be anyone)

Signature _____

Date _____

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

PRE-ENTRANCE REQUIREMENTS FOR

LAW ENFORCEMENT TRAINEES

DIRECTIONS:

It is important that you, the applicant, know and understand the entrance requirements in the Missouri Sheriffs' Association Training Academy. Please read and initial each of the following entrance requirements.

- _____ 1. Must have a high school diploma or GED.
- _____ 2. Must have visual ability sufficient to operate a vehicle in the State of Missouri (20 / 40) by both day and night, to observe traffic violations, to read and write reports, correspondence, etc.
- _____ 3. Must have the ability to effectively communicate via radio and telephone.
- _____ 4. Must complete all phases of the application process.
- _____ 5. Must have a good driving record.
- _____ 6. Must have a current valid driver's license.
- _____ 7. Must be of good moral character and personal habits (good background).
- _____ 8. Must have no gross misconduct indicating inability to function as a peace officer.
- _____ 9. **NO FELONY CONVICTIONS**, S.I.S. (Suspended Imposition of Sentence), or S.E.S. (Suspended Execution of Sentence)
- _____ 10. No misdemeanor convictions, S.I.S or S.E.S. involving moral turpitude.
- _____ 11. Must successfully complete pre-entrance screening and review of Academy application.
- _____ 12. Must be a citizen of the United States.

By my signature below, I have read and understand the above entrance requirements for the Missouri Sheriffs' Association Training Academy. I understand that failure to comply with any of the above requirements or making any false representation of any kind will result in denial into the Missouri Sheriffs' Association Training Academy or permanent dismissal from the Missouri Sheriffs' Association Training Academy. I also understand that the Missouri Sheriffs' Association Training Academy in no way guarantees a job in law enforcement, but will provide the required training for licensing as a peace officer in the State of Missouri.

I sign this form voluntarily.

Signature _____

Date _____

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY
AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize the Missouri Sheriffs' Association Training Academy to release any and all information contained in my Academy file(s) to any law enforcement agency.

Signature _____

Date _____

Witnessed by _____
(can be anyone)

MISSOURI SHERIFFS' ASSOCIATION AND TRAINING ACADEMY

CRIMINAL JUSTICE REFERENCE

Each applicant in the Missouri Sheriffs' Association Training Academy must provide one (1) law enforcement or professional reference in order to be considered for acceptance into the Basic Academy program. The reference must be a law enforcement officer currently active either on a local, state or federal level or a professional reference (i.e. supervisor, pastor, business leader). The individual listed as your reference will be contacted.

PLEASE PRINT ALL INFORMATION CLEARLY

Name _____

Title _____

Agency Name _____

Agency Address _____

Work Phone Number _____

Cell Phone Number _____

Email Address _____

Please return the application to:

**Missouri Sheriffs' Association and Training Academy
6605 Business 50 West
Jefferson City, MO 65109-6307**



Missouri Peace Officer License Legal Questionnaire



New Licensure Applicants

Last Revised 03/09/2017

Instructions:

- All basic training applicants shall complete this questionnaire prior to being admitted into a basic training course.
- If the applicant indicates "yes" to the question listed below, submit the questionnaire to the POST Program for review **prior** to admitting the individual into a basic training course.
- Maintain a copy of the completed questionnaire and submit it along with the individual's Peace Officer License Application.

Licensed Basic Training Center: **Missouri Sheriffs' Association & Training Academy**

Applicant's Name: _____ DOB: _____

Social Security Number: _____ Daytime Telephone Number: _____

Home Mailing Address _____

Have you ever been arrested for, charged with, or committed any criminal offense? (§ 590.080.1(2), RSMo)

YES * NO

*If yes, describe the offense(s) below. If needed, you may attach additional pages.

Date	Charge/Offense	City/County/State	Misd/Felony/Ordinance	Disposition	Arresting Agency

Before signing and submitting the notarized questionnaire, please feel free to discuss any questions you might have with a representative of the POST Program by calling (573)751-3409.

I am aware that causing a material fact to be misrepresented for the purpose of obtaining a peace officer license issued pursuant to Chapter 590 RSMo, is a Class B Misdemeanor.

Signature of Applicant: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20___. I am commissioned as a notary public within the county of _____, state of _____, and my commission expires on _____, 20__.

NOTARY PUBLIC

POST USE ONLY

Based on the information provided, the above listed applicant is eligible for licensure.

POST Program Representative: _____ Date: _____

AUTHORIZATION FOR RELEASE OF INFORMATION

Rev. 06.28.2018

I, _____ hereby authorize any individual, organization, court, or law enforcement agency to release any and all records related to my prior law enforcement training and certification or licensure; any and all records related to any criminal or internal investigation conducted on me; and any and all pre-employment application or employment records pertaining to me, to the Missouri Department of Public Safety's Peace Officer Standards and Training Program for the purpose of obtaining or retaining a peace officer license.

A copy of this authorization will be considered as effective and valid as the original and shall not expire.

Signature of Applicant or Licensee

Date

Subscribed and sworn to before me this _____ day of _____, 20____. I am commissioned as a notary public within the county of _____, state of _____, and my commission expires on _____, 20____.

NOTARY PUBLIC



Missouri Peace Officer License Application

Last Revised 01.01.2016



LICENSED TRAINING CENTER INFORMATION

Training Center Name Missouri Sheriffs' Association & Training Academy		Contact Name Kevin Merritt, Interim Executive Director	
Contact's E-mail Address kevin@msheriffs.com	Phone Number (573) 635-9644	Fax Number (573) 635-2128	

APPLICANT INFORMATION

Name (Last, First, Middle)	E-Mail Address	Social Security Number	
Mailing Address	City	State	Zip Code
Telephone Number ()	Date of Birth	Age	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female

ATTESTATION BY APPLICANT

Have you previously applied for admittance into any other a basic law enforcement academy? Yes No If yes, please indicate the name of the training center and the state in which it was located: _____

I am aware that causing a material fact to be misrepresented for the purpose of obtaining a peace officer license issued pursuant to Chapter 590 RSMo, is a Class B Misdemeanor.

Signature of Applicant

Date

PLEASE ATTACH ALL DOCUMENTS LISTED BELOW IN THE ORDER THAT THEY ARE REQUESTED.

1. Copy of High School Diploma, GED, or Degree from an accredited college or university.
2. Proof of United States Citizenship: Birth Certificate, Passport, or Naturalization Documentation. If name has been changed, include marriage license, divorce decree, or legal name change documentation.
3. Completed Missouri Peace Officer License Legal Questionnaire **and** the Authorization for Release of Information.
4. Photocopy of the applicant's current state issued driver's license.

ADDITIONAL INFORMATION REQUIRED FROM CERTAIN TRAINING CENTERS

In addition to the three items listed above, the following items are required from the **Missouri State Highway Patrol, the Missouri Department of Conservation, the St. Louis City Police Department, the Kansas City Police Department, and the Springfield Police Department:**

- 1 Agency ORI: _____
- 2 Date Applicant will be Commissioned by your department, unless individual is an open enrollment applicant: _____

SEND THIS FORM AND ATTACHMENTS TO POST

Missouri Department of Public Safety Peace Officer Standards & Training (POST) Program P.O. Box 749 Jefferson City, MO 65102 Phone: (573) 751-3409 Fax: (573) 751-5399 Email: post@dps.mo.gov Website: www.dps.mo.gov/post	FOR POST USE ONLY:	
	POST Test Date: _____	Proof of U.S. Citizenship: _____
	Graduation Date: _____	Diploma/Degree: _____
	IADLEST Check: _____	Legal Questionnaire: _____
	Basic Training Hours: _____	SID#: _____
	Processed by: _____	Reviewed by: _____
Program Manager Approval: _____	Date: _____	
Exam Score: _____	License #: _____	

Missouri Sheriffs' Association Applicant Questionnaire

Name: _____

Location: _____

1. Have you had your fingerprints taken? Yes No

Did you mail, fax or email your fingerprint receipt to the academy? Yes No

If not, please send immediately to gina@mosheriffs.com or fax to 573-635-2128 or mail it to

Missouri Sheriffs' Association & Training Academy

6605 Business 50 West

Jefferson City, MO 65109

2. This course will be conducted on Tuesday and Thursday evenings from 6:00 to 10:00 p.m. and each Saturday from 8:00 a.m. to 5:00 p.m. In addition, some Sunday sessions will be scheduled. Are you committed to spending this much of your time for class work, plus study time to the Academy?

Yes No

a. Have you made arrangements with your employer as to the class schedule?

b. Have you talked with your spouse and family as to the class schedule?

c. How far one way must you travel to attend the Academy?

d. How do you plan to finance the tuition for this course?
(financial aid, self pay, etc.)

e. Mandatory make-up - all classes missed must be made up. If additional cost, it is the responsibility of the student. Do you understand this? Yes No

3. Have you ever applied for admission to the MSATA or any another law enforcement academy?

a. If so, when and where?

b. Were you admitted?

c. If so, why did you leave?

d. Was admission denied?

e. If so, on what basis was admission denied?

4. Describe any personal attributes, skills and experience you possess and explain how they will benefit you as a law enforcement professional.

5. How confident are you that you can successfully perform the educational / classroom work to be a graduate of the Missouri Sheriff's Association Training Academy and why?

6. Describe the goals and aspirations of your law enforcement career.

7. Give an example of a situation where you helped your colleague perform a particular task in which you had better knowledge on the subject

8. What thought process will you use in a situation where you need to make an immediate decision?

9. You came into the academy class room and shortly after class began, you notice an odor of alcohol coming from one of your classmates, when they talk to you, you notice their speech is slurred and they are bragging about how tired they are and how much fun and partying they did last night, what would you do?

10. One of the requirements to be accepted in the academy is that the individual be a self-starter. Give us an example of your ability to be a self-starter.

11. You and your classmate are having a conversation and he tells you he sold a gun over the weekend to John Smith. Both of you have known John Smith for years and you both know that John Smith is a convicted felon for burglary. How would you handle this situation? Remember, even in the academy, some cadets support the Blue wall of silence.

12. Define Professionalism? In your opinion, how should the Professionalism of a Sheriff's Academy Cadet be measured?

13. You are given a number of assignments. How will you prioritize the assignments?
1. Typing an academy training Incident Reports 2. Son or daughters sporting event
3. Wife/Husbands Honey do list 4. Studying for an academy exam

14. Give me an example of a time when you used your fact-finding skills to solve a problem.

15. Describe a time when you anticipated potential problems for an upcoming exam and developed preventive measures.

16. Explain how your personal life reflects your professional life and vice versa. (We live in a glass bubble, everyone sees when we make a mistake).

17. How do you react when asked to do something beyond your capabilities?

18. Can you describe a situation that really tested your patience, and what your actions were?

19. Do you have any special learning needs we need to be aware of?

a. If so, what are they?

b. Have you ever been diagnosed by any doctor or educational professional as having any type of learning disorder?

c. Are you currently taking medication?

d. Do you have any prior medical condition we should be aware of? Explain physical activities involved.

20. Have you ever been arrested or charged with any criminal offense (***including charges that have been expunged or charges that resulted in your being detained but were later dismissed***)?

a. If so, what were you arrested for and what were the circumstances?

b. Have you ever been convicted of, been found guilty of, or plead guilty to any crime, to include receiving a suspended imposition of sentence (SIS)?

c. If so, what were the charges?

d. We will be conducting a background check, is there anything that you have not told us that would prevent you from becoming a police officer? Is there anything you have not told us that we might find out that would prevent you from being eligible to be licensed by the state of Missouri as a police officer?

21. Have you ever been the respondent to an Order of Protection? _____

If so, when and how long was the order for? _____

What were the circumstances?

NOTE: If you are currently under an Order of Protection for domestic violence, you cannot attend the academy.

22. Do you possess a valid Missouri driver's license? Yes No
- a. Has your license ever been suspended or revoked?

- b. Do you have current auto insurance in effect now? Yes No
23. We will be issuing you a thumb drive with a majority of the study material you will need for the Academy. Do you own or have access to a computer, preferably a laptop that will accept a thumb drive? Yes No
24. If you have access to a laptop, could you bring it to class? Yes No
25. Shirt size _____
26. How would you like your name to appear on your name plate? _____
(please use first & last name)
27. Do you understand you have to be 21 in order to take the POST licensing exam and subsequently be licensed? Yes No
28. Is the criminal justice reference complete on the application? Yes No
29. Do you have any questions of us?

**** bring back pack the first night of class ****

**** fingerprint receipt needs to be mailed, faxed or emailed to the Missouri Sheriffs' Association ****

**** if you has been arrested you needs to obtain a certified copy of the investigative report and a certified copy of the court disposition. In addition, submit a statement detailing your involvement that led to the criminal charges. ****

**** MSATA only provides basic law enforcement training and cannot guarantee that the student will be offered employment with any law enforcement agency or other employer ****

**** all students must be clean shaven, no beards, goatees, etc. Mustaches are acceptable but may not exceed beyond corner of the mouth and be neatly trimmed. Sideburns will be neatly trimmed and not extend below the middle of the ear. ****

**** Financial Aid is available through Missouri State University – West Plains Campus. Contact Rachel Peterson @ 417-255-7978 for more information.**



ANNOUNCEMENT

New Applicant Fingerprint Vendor

The State of Missouri recently awarded the Applicant Fingerprint Services contract to IDEMIA. IDEMIA will begin fingerprint services for Missouri on **Monday, August 6, 2018**.

The Criminal Justice Information Services (CJIS) Division of the Missouri State Highway Patrol will be working with IDEMIA to implement the new fingerprint services contract. Items of importance include:

- The MACHS registration process will not change;
- The MACHS registration agency code(s) will not change;
- Fingerprint locations MAY change

NOTE: MACHS registration Transaction Control Numbers (TCN) will change to reflect the new vendor. **Please be aware of the registration deadline outlined below:**

1. Applicants who register on MACHS for finger printing on or prior to **Wednesday, August 1, 2018 must be fingerprinted prior to the close of business on Friday, August 3, 2018**.
2. The TCN beginning with "MH" will be valid ONLY until close of business on Friday, August 3, 2018. If the TCN beginning with "MH" is not used prior to or before close of business on Friday, August 3, 2018, the TCN will be invalid and the applicant will be required to re-register. A refund of any fees paid for an unused TCN should be requested through Cogent/Gemalto by cancelling the registration.
3. **MACHS registrations will not be available on Saturday, August 4, 2018 and Sunday, August 5, 2018.**
4. **MACHS registrations for fingerprinting with the new vendor IDEMIA will begin on Monday, August 6, 2018.**
5. All completed fingerprint registrations beginning Monday, August 6, 2018 will have a unique TCN of "MP" which will be used by IDEMIA.

The CJIS Division, in conjunction with IDEMIA, will have a few new enhancements with the registration and fingerprint process. Enhancements include improved document verification prior to fingerprinting and capturing the applicant's signature electronically at the time of fingerprinting.

Since we are currently working under a narrow implementation timeline, the CJIS Division and/or IDEMIA will be providing additional correspondence, via letters and through Email, regarding contract implementation and other enhancements as we move forward. Please view the CJIS Division's Home page as well as the MACHS website for additional information.

We sincerely appreciate your patience and assistance with this transition to a new fingerprint vendor. Should you need additional assistance or have questions, please feel free to contact your regional CJIS Trainer/Auditor.

7/10/2018

Dear Valued Missouri Customer,

IDEMIA is pleased to introduce our Universal Enrollment Platform (UEP), the newest solution in our fingerprint technology, to the State of Missouri. Over the coming weeks, MO Agencies and stakeholders will receive information about our UEP solution along with a new redesigned website and new workstations in our IdentoGo centers. We appreciate being able to service the constituents of the State

Of Missouri and we look forward to meeting the needs of Missouri citizens who depend on professional, convenient, and reliable biometric enrollment services.

Under the new solution, you can expect some significant program enhancements. Missouri is the latest state program scheduled to receive our nationally recognized technology known as UEP. This truly modern solution delivers a higher level of convenience and program sophistication to our customers. UEP was developed from the ground up to service the unique needs of our industry. We are excited to bring this solution to our Missouri customers.

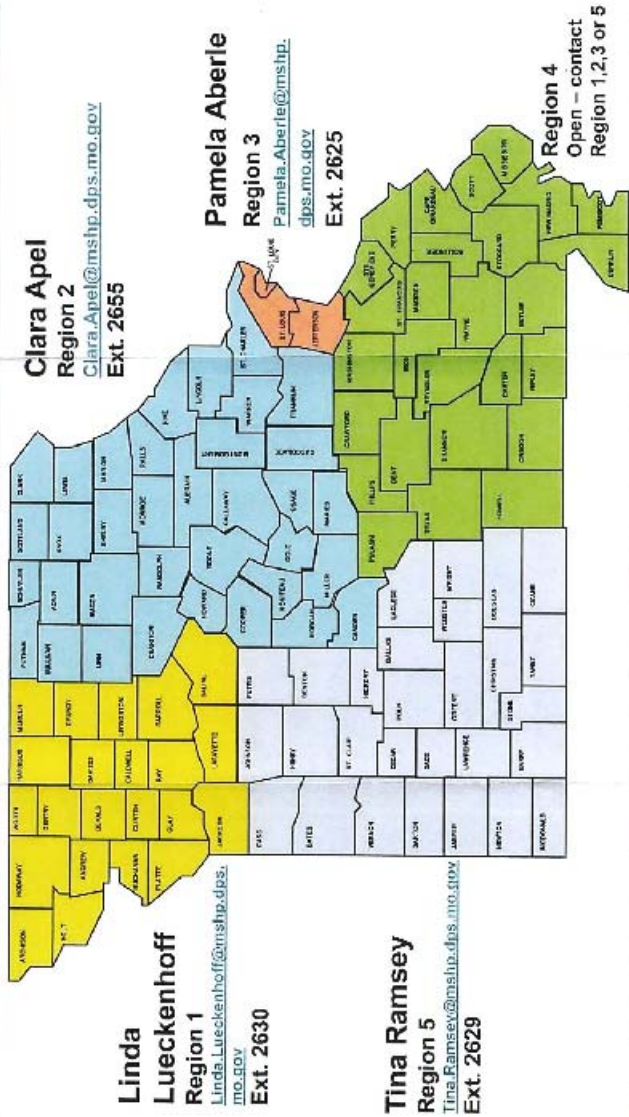
Here are a few of the exciting changes that will benefit your organization:

- ***New user friendly website, integrated with the MACHS registration website***
- ***Convenience and flexibility***
 - ***Schedule a fingerprinting appointment or just walk into one of our convenient locations.***
 - ***Register for Hard Card processing services if applicants are out of state or unable to visit an IdentoGo center***
 - ***Variety of onsite payment options accepted, including credit cards and checks***
 - ***Set-up and track Payment coupons (NCAC codes) for agency/organization paid services***
- ***New workstations, simplified to allow faster processing onsite***
 - ***Enrollment times at location on average 5 minutes***
 - ***Improved fingerprint quality capture, resulting in fewer reprints***
- ***New locations, all branded as IdentoGo centers***
 - ***Location located within a 25 mile rcrdiCJs***
 - ***ADA accessible***
 - ***Easily recognized, with consistent signage at all locations***
- ***New identification requirements, including photo requirements***

We are developing the schedule for transition to UEP, with a Go Live date of 8/6/2018. We will deploy a large amount of sites to have them active by the end of that week, and transition additional sites as they are ready. There is no action necessary you to do at this time. Additional communication regarding details and next steps regarding this transition will be forthcoming from our Operations and Delivery teams. Our intent is to partner closely with our customers to ensure a seamless transition that minimizes impact to your core business.

Thank you again for your support of the Missouri program! We look forward to providing this updated solution to the residents of Missouri in the near future.

**CJIS Division
Noncriminal Justice (NCJ)
Access and Audit Unit**



NCJ Access and Audit Unit (573) 526-6153
CJIS Program Manager – Kerry Creach (573) 522-3821