



PEACE OFFICER STANDARDS AND TRAINING COMMISSION

84 State St 2nd Floor, Boston, MA 02109

PROFESSIONAL REFERENCE FORM

To be completed by the professional reference of a self-sponsored officer seeking POST certification.

Applicant's Name: _____

Reference's Name: _____

Relationship to Applicant: _____

Email: _____ Phone Number: _____

If reference is POST Certified:

Certification Number: _____ Certification Status: _____ Exp. _____

Please discuss the extent to which the applicant possesses good character and fitness for employment as a law enforcement officer. The requirements for certification can be found at [555 CMR 9.08\(2\)](#).

Please maintain any relevant documentation concerning the applicant, and be advised that the Commission may request any such documentation.

Signature

Date