



# Southwest Texas College Law Enforcement Academy

2401 Garner Field Road  
Uvalde, Texas 78801  
PH: (830) 591-4158  
Fax: (830) 591-4159



## **\*\* Academy Application Packet Check List\*\***

ID# \_\_\_\_\_ PID# \_\_\_\_\_  
APPLICANT NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ PHONE # \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
DRIVERS LICENSE #: \_\_\_\_\_ STATE \_\_\_\_\_  
EMAIL: \_\_\_\_\_

<b>2025 / 2026</b> UVALDE <u>FULLTIME</u> CLASS <b><u>DAY ACADEMY</u></b> (Aug. 4, 2025 – Jan. 23, 2026) Mandatory Orientation August 1, 2025 / 8am-5pm
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<b>2025 / 2026</b> EAGLE PASS - <u>PART TIME</u> CLASS <b><u>NIGHT ACADEMY</u></b> (August 18, 2025 – May 8, 2026) Mandatory Orientation Aug. 14, 2025 / 5:30p-10:30p
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<b>2025 / 2026</b> UVALDE <u>PART TIME</u> CLASS <b><u>NIGHT ACADEMY</u></b> (August 18, 2025 - May 8, 2026) Mandatory Orientation Aug. 15, 2025 / 5:30p-10:30p
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1. \_\_\_\_\_ TSI Assessment Exam \_\_\_\_\_  
Reading Score / Writing Score Date
2. \_\_\_\_\_ Academy Application for Admission
3. \_\_\_\_\_ Complete SWTX On-Line Application for Admissions <https://www.applytexas.org/>
4. \_\_\_\_\_ Complete, print, and submit Personal History Statement (TCOLE)  
[https://www.tcole.texas.gov/document/personal\\_history\\_statement\\_05012020.pdf](https://www.tcole.texas.gov/document/personal_history_statement_05012020.pdf)
5. \_\_\_\_\_ Complete Academy Liability Waiver - (Must be signed by student & be **Notarized**)
6. \_\_\_\_\_ Must see Official Birth Certificate / Driver's License / Social Security Card
7. \_\_\_\_\_ Official High School Transcript / GED Certificate / College Transcript
8. \_\_\_\_\_ Copy of DD214 for all military personnel (Cannot have Dishonorable Discharge)
9. \_\_\_\_\_ **FAST-Academy# LE-511271** @ <https://uenroll.identogo.com/servicecode/11G4J8> (within 180 days)
10. \_\_\_\_\_ **Certified Complete DPS Copy of Driving Record – (3a Report)** (within 180 days)  
<https://txapps.texas.gov/tolapp/txldrdr/TXDPSLicenseeManager>
11. \_\_\_\_\_ **TCOLE L-2 Form Declaration of Medical Condition / Drug Screen** (within 180 days)
12. \_\_\_\_\_ **TCOLE L-3 Form Declaration of Psychological and Emotional Health** (within 180 days)
13. \_\_\_\_\_ Meningitis Vaccine – For Students under 22 years of age
14. \_\_\_\_\_ If applying for Federal Student Aid – **School Code: 003614** <https://studentaid.gov/h/apply-for-aid/fafsa>

COMPLETED PACKET ON: \_\_\_\_\_ BY: \_\_\_\_\_

Date



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## **TSI WAIVER FORM**

**I, \_\_\_\_\_, have been counseled about the advantages of taking the TSI, (Texas Success Initiative Assessment), examination in reference to furtherance of my academic career. I have been advised by Academy Staff that taking and passing the TSI examination is not a required prerequisite for entry into the Southwest Texas College Law Enforcement Academy.**

- ☐ **I will take the TSI examination prior to entry into the Southwest Texas College Law Enforcement Academy.**
- ☐ **I will not take the TSI examination prior to entry into the Southwest Texas College Law Enforcement Academy.**

**Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**

**Academy Staff Initials: \_\_\_\_\_**

**Date: \_\_\_\_\_**



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## ACADEMY APPLICATION

NAME: \_\_\_\_\_

(FIRST)

(MIDDLE)

(LAST)

AGE: \_\_\_\_\_ D.O.B. \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_  
MO. DAY YEAR

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_  
If different than above

TELEPHONE: \_\_\_\_\_ SECONDARY TELEPHONE: \_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

MILITARY SERVICE: YES \_\_\_\_\_ NO \_\_\_\_\_ BRANCH \_\_\_\_\_

TYPE DISCHARGE: \_\_\_\_\_ IF OTHER THAN HONORABLE EXPLAIN: \_\_\_\_\_  
ATTACH COPY OF DD-214:

HAVE YOU EVER BEEN ARRESTED FOR, CHARGED WITH, INDICTED OR CONVICTED OF ANY OFFENSE OTHER THAN A TRAFFIC VIOLATION IN THIS STATE, ANY OTHER STATE OR FOREIGN COUNTRY? (INCLUDE JUVENILE ARRESTS) YES \_\_\_\_\_ NO \_\_\_\_\_

SIGNATURE \_\_\_\_\_

EDUCATION: (NAME OF SCHOOLS)

HIGH SCHOOL: \_\_\_\_\_ GRADUATE: YES \_\_\_\_\_ NO \_\_\_\_\_

COLLEGE: \_\_\_\_\_ GRADUATE: YES \_\_\_\_\_ NO \_\_\_\_\_

DO YOU HAVE PRIOR LAW ENFORCEMENT EXPERIENCE? YES \_\_\_\_\_ NO \_\_\_\_\_

NAME OF AGENCY AND STATE \_\_\_\_\_

YEARS OF EXPERIENCE \_\_\_\_\_

YEAR TERMINATED OR RESIGNED \_\_\_\_\_



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## RELEASE OF LIABILITY

I, \_\_\_\_\_, as a condition of participation with the Southwest Texas College Law Enforcement Academy in the **BASIC PEACE OFFICER PROGRAM** (Which activities include, but are not limited to physical fitness, defensive tactics, firearms training, drivers / vehicle training, and physical restraint tactics), agree to hereby release, discharge, and indemnify the Southwest Texas College Law Enforcement Academy and its agents and volunteers, employees and officers from all costs, claims, actions, demands, judgments, and liabilities of any kind arising from improper negligent use of, participation in, or involvement with the training conducted by the Southwest Texas College Law Enforcement Academy .

I further agree to forever release the Southwest Texas College Law Enforcement Academy and its agents and volunteers, employees and officers from any and all causes of action including personal injury, illness, death, property damage, costs, charges, claims, demands and liabilities of whatever kind, in any manner arising out of said participation with the **BASIC PEACE OFFICER PROGRAM**.

I also agree to forever release the Southwest Texas College Law Enforcement Academy and its agents and volunteers, employees and officers from any and all causes of action which my family, my guardians, executors, administrators, assigns, and present or future heirs may have against the Southwest Texas College Law Enforcement Academy and its agents and volunteers, employees and officers and / or any of the other training participants.

I have acknowledged and accepted the fact the **BASIC PEACE OFFICER PROGRAM** training activities bear certain known risks and other unanticipated risks which could result in injury, death, illness, damage to health and wellness, and damage to property.

This release shall remain in effect for as long as training is conducted by Southwest Texas College Law Enforcement Academy or until I notify the Southwest Texas College Law Enforcement Academy staff in writing regarding the nullification of this release.

\_\_\_\_\_  
Applicant's / Participant's authorization

\_\_\_\_\_  
Date

Date of Birth \_\_\_\_\_

Social Security # \_\_\_\_\_

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Notary public in and for, State of Texas \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Notary

My commission expires \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Signature of Notary

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# Texas Administrative Code

[TITLE 37](#)

## PUBLIC SAFETY AND CORRECTIONS

[PART 7](#)

## TEXAS COMMISSION ON LAW ENFORCEMENT

[CHAPTER 217](#)

## ENROLLMENT, LICENSING, APPOINTMENT, AND SEPARATION

## RULE §217.1

## Minimum Standards for Enrollment and Initial Licensure

(a) In order for an individual to enroll in any basic licensing course the provider must have on file documentation, acceptable to the Commission, that the individual meets eligibility for licensure.

(b) The commission shall issue a license to an applicant who meets the following standards:

(1) minimum age requirement:

(A) for peace officers and public security officers, is 21 years of age; or 18 years of age if the applicant has received:

(i) an associate's degree; or 60 semester hours of credit from an accredited college or university; or

(ii) has received an honorable discharge from the armed forces of the United States after at least two years of active service;

(B) for jailers and telecommunicators is 18 years of age;

(2) minimum educational requirements:

(A) has passed a general educational development (GED) test indicating high school graduation level;

(B) holds a high school diploma; or

(C) for enrollment purposes in a basic peace officer academy only, has an honorable discharge from the armed forces of the United States after at least 24 months of active duty service;

(3) is fingerprinted and is subjected to a search of local, state and U.S. national records and fingerprint files to disclose any criminal record;

(4) has never been on court-ordered community supervision or probation for any criminal offense above the grade of Class B misdemeanor or a Class B misdemeanor within the last ten years from the date of the court order;

(5) is not currently charged with any criminal offense for which conviction would be a bar to licensure;

(6) has never been convicted of an offense above the grade of a Class B misdemeanor or a Class B misdemeanor within the last ten years;

(7) has never been convicted or placed on community supervision in any court of an offense involving family violence as defined under Chapter 71, Texas Family Code;

(8) for peace officers, is not prohibited by state or federal law from operating a motor vehicle;

(9) for peace officers, is not prohibited by state or federal law from possessing firearms or ammunition;

(10) has been subjected to a background investigation completed by the enrolling or appointing entity into the

applicant's personal history. A background investigation shall include, at a minimum, the following:

(A) An enrolling entity shall:

(i) require completion of the Commission-approved personal history statement; and

(ii) verify that the applicant meets each individual requirement for licensure under this rule based on the personal history statement and any other information known to the enrolling entity; and

(iii) contact all previous enrolling entities.

(B) In addition to subparagraph (A) of this paragraph, a law enforcement agency or law enforcement agency academy shall:

(i) require completion of the Commission-approved personal history statement; and

(ii) meet all requirements enacted in Occupations Code 1701.451, including submission to the Commission of a form confirming all requirements have been met. An in-person review of personnel records is acceptable in lieu of making the personnel records available electronically if a hiring agency and a previous employing law enforcement agency mutually agree to the in-person review.

(11) examined by a physician, selected by the appointing or employing agency, who is licensed by the Texas Medical Board. The physician must be familiar with the duties appropriate to the type of license sought and appointment to be made. The appointee must be declared by that professional, on a form prescribed by the commission, within 180 days before the date of appointment by the agency to be:

(A) physically sound and free from any defect which may adversely affect the performance of duty appropriate to the type of license sought;

(B) show no trace of drug dependency or illegal drug use after a blood test or other medical test; and

(C) for the purpose of meeting the requirements for initial licensure, an individual's satisfactory medical exam that is conducted as a requirement of a basic licensing course may remain valid for 180 days from the individual's date of graduation from that academy, if accepted by the appointing agency;

(12) examined by a psychologist, selected by the appointing, employing agency, or the academy, who is licensed by the Texas State Board of Examiners of Psychologists. This examination may also be conducted by a psychiatrist licensed by the Texas Medical Board. The psychologist or psychiatrist must be familiar with the duties appropriate to the type of license sought. The individual must be declared by that professional, on a form prescribed by the commission, to be in satisfactory psychological and emotional health to serve as the type of officer for which the license is sought. The examination must be conducted pursuant to professionally recognized standards and methods. The examination process must consist of a review of a job description for the position sought; review of any personal history statements; review of any background documents; at least two instruments, one which measures personality traits and one which measures psychopathology; and a face to face interview conducted after the instruments have been scored. The appointee must be declared by that professional, on a form prescribed by the commission, within 180 days before the date of the appointment by the agency;

(A) the commission may allow for exceptional circumstances where a licensed physician performs the evaluation of psychological and emotional health. This requires the appointing agency to request in writing and receive approval from the commission, prior to the evaluation being completed; or

(B) the examination may be conducted by qualified persons identified by Texas Occupations Code § 501.004. This requires the appointing agency to request in writing and receive approval from the commission, prior to the evaluation being completed; and

(C) for the purpose of meeting the requirements for initial licensure, an individual's satisfactory psychological exam that is conducted as a requirement of a basic licensing course may remain valid for 180 days from the individual's date of graduation from that academy, if accepted by the appointing agency;

(13) has never received a dishonorable discharge from the armed forces of the United States;

(14) has not had a commission license denied by final order or revoked;

(15) is not currently on suspension, or does not have a surrender of license currently in effect;

(16) meets the minimum training standards and passes the commission licensing examination for each license sought;

(17) is a U.S. citizen or is a legal permanent resident of the United States, if the person is an honorably discharged veteran of the armed forces of the United States with at least two years of service before discharge and presents evidence satisfactory to the commission that the person has applied for United States citizenship.

(c) For the purposes of this section, the commission will construe any court-ordered community supervision, probation or conviction for a criminal offense to be its closest equivalent under the Texas Penal Code classification of offenses if the offense arose from:

(1) another penal provision of Texas law; or

(2) a penal provision of any other state, federal, military or foreign jurisdiction.

(d) A classification of an offense as a felony at the time of conviction will never be changed because Texas law has changed or because the offense would not be a felony under current Texas laws.

(e) A person must meet the training and examination requirements:

(1) training for the peace officer license consists of:

(A) the current basic peace officer course(s);

(B) a commission recognized, POST developed, basic law enforcement training course, to include:

(i) out of state licensure or certification; and

(ii) submission of the current eligibility application and fee; or

(C) a commission approved academic alternative program, taken through a licensed academic alternative provider and at least an associate's degree.

(2) training for the jailer license consists of the current basic county corrections course(s) or training recognized under Texas Occupations Code §1701.310;

(3) training for the public security officer license consists of the current basic peace officer course(s);

(4) training for telecommunicator license consists of telecommunicator course; and

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[TITLE 37](#)

## PUBLIC SAFETY AND CORRECTIONS

[PART 7](#)

## TEXAS COMMISSION ON LAW ENFORCEMENT

[CHAPTER 217](#)

## ENROLLMENT, LICENSING, APPOINTMENT, AND SEPARATION

## RULE §217.1

## Minimum Standards for Enrollment and Initial Licensure

(5) passing any examination required for the license sought while the exam approval remains valid.

(f) The commission may issue a provisional license, consistent with Texas Occupations Code §1701.311, to an agency for a person to be appointed by that agency. An agency must submit all required applications currently prescribed by the commission and all required fees before the individual is appointed. Upon the approval of the application, the commission will issue a provisional license. A provisional license is issued in the name of the applicant; however, it is issued to and shall remain in the possession of the agency. Such a license may neither be transferred by the applicant to another agency, nor transferred by the agency to another applicant. A provisional license may not be reissued and expires:

(1) 12 months from the original appointment date;

(2) on leaving the appointing agency; or

(3) on failure to comply with the terms stipulated in the provisional license approval.

(g) The commission may issue a temporary jailer license, consistent with Texas Occupations Code §1701.310. A jailer appointed on a temporary basis shall be enrolled in a basic jailer licensing course on or before the 90th day after their temporary appointment. An agency must submit all required applications currently prescribed by the commission and all required fees before the individual is appointed. Upon the approval of the application, the commission will issue a temporary jailer license. A temporary jailer license may not be renewed, except that the sheriff may petition the commission to extend the temporary appointment for a period not to exceed six months. A temporary jailer license expires:

(1) 12 months from the original appointment date;

(2) at the end of a six-month extension, if granted; or

(3) on completion of training and passing of the jailer licensing examination.

(h) A person who has previously been issued a temporary jailer license and separated from that position may be subsequently appointed on a temporary basis as a county jailer at the same or a different county jail only if the person was in good standing at the time the person separated from the position.

(i) A person who has cumulatively served as a county jailer on a temporary basis for two years may continue to serve for the remainder of that temporary appointment, not to exceed the first anniversary of the date of the most recent appointment. The person is not eligible for an extension of that appointment or for a subsequent appointment on a temporary basis as a county jailer at the same or a different county jail until the first anniversary of the date the person separates from the temporary appointment during which the person reached two years of cumulative service.

(j) A person whose county jailer license has become inactive may be appointed as a county jailer on a temporary basis.

(k) The commission may issue a temporary telecommunicator license, consistent with Texas Occupations Code



§1701.405. An agency must submit all required applications currently prescribed by the commission and all required fees before the individual is appointed. Upon the approval of the application, the commission will issue a temporary telecommunicator license. A temporary telecommunicator license expires:

(1) 12 months from the original appointment date; or

(2) on completion of training and passing of the telecommunicator licensing examination. On expiration of a temporary license, a person is not eligible for a new temporary telecommunicator license for one year.

(l) A person who fails to comply with the standards set forth in this section shall not accept the issuance of a license and shall not accept any appointment. If an application for licensure is found to be false or untrue, it is subject to cancellation or recall.

(m) The effective date of this section is April 1, 2024.

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**Source Note:** The provisions of this §217.1 adopted to be effective November 1, 2014, 39 TexReg 7935; amended to be effective February 1, 2016, 41 TexReg 274; amended to be effective May 1, 2018, 43 TexReg 1879; amended to be effective February 5, 2020, 45 TexReg 765; amended to be effective June 1, 2022, 47 TexReg 2883; amended to be effective April 1, 2024, 49 TexReg 1967

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**TCOLE/Non-Law Enforcement Academies (ORI TCOLE/Non-Law Enforcement  
Academies/Service Code 11G4J8)**

The general process for electronic fingerprinting is:

1. Schedule an appointment to be electronically fingerprinted by MorphoTrust USA at one of their IdentoGo enrollment centers.
  - Internet based scheduling is the quickest and most convenient way to obtain a fingerprint appointment.
    - a. **You may begin the process now by simply clicking on this link:**  
<https://uenroll.identogo.com/servicecode/11G4J8>
    - b. Academy Number: **LE- 511271**
    - c. Provide all required pre-enrollment data and select a convenient date and time for your appointment
  - If you prefer to schedule over the telephone, you must:
    - a. Have your Service Code ready (**11G4J8**), then call **888.467.2080**;
    - b. MorphoTrust will prompt you for the Service Code (**11G4J8**);
    - c. Provide all required pre-enrollment data and select a convenient date and time for your appointment
2. Arrive at your scheduled appointment with your photo identification and fee **(\$39.75)**
  - If you plan on bringing a form of identification other than a valid (unexpired) TX Driver License, please refer to the Department of Public Safety's acceptable document types here: <http://www.tnrollment.com/state/forms/tx/55fc619a7f7aa.doc>
  - MorphoTrust accepts Visa/MasterCard/Discover/American Express, business checks, money orders and coupon codes (employer accounts) at the time of service.
  - Please note that personal checks and cash are **not accepted**.
3. Your fingerprints will be submitted electronically to DPS and the FBI. You will not receive a printed fingerprint card.
4. At the conclusion of your appointment, the MorphoTrust enrollment agent will provide you with an IdentoGo receipt stating that you were fingerprinted.
  - Do not throw away the receipt;
  - You may check status on your submission by clicking on this link:  
<https://uenroll.identogo.com/servicecode/11G4J8> and then;
  - Click "**Check Status**"

Fingerprints provided for this application shall be used to check criminal history records of the Texas Department of Public Safety and the Federal Bureau of Investigation, in accordance with applicable statutes.



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## PHYSICIAN'S PHYSICAL ACTIVITY APPROVAL FORM

Throughout the law enforcement academy, cadets will be required to perform vigorous physical exertion activities on a daily basis. These activities include, but are not limited to the following:

1. Running up to one mile daily
2. Push-ups
3. Sit-ups
4. Mountain climbers
5. Chin-up
6. Leg raises
7. Jumping jacks
8. Hand-to-hand fighting
9. Baton training
10. Firearms training
11. Any other physical exercise the coordinator or instructors feel is necessary to prepare the cadet for a law enforcement career. These activities may take place outside during varied temperature and weather conditions based on the time of day/year. Some of these activities may also take place in temperature-controlled environments.

### PHYSICIAN STATEMENT:

\_\_\_\_\_ (Name of Applicant)  
is determined to be physically and mentally capable of participating in the physical activities of the Southwest Texas College Law Enforcement Academy.

\_\_\_\_\_  
Physician's Printed Name                      State License #                      Office/Clinic Phone Number

\_\_\_\_\_  
Mailing Address                      City                      State                      Zip Code

\_\_\_\_\_  
Physician Signature                      Date of Examination

## TEXAS COMMISSION ON LAW ENFORCEMENT

6330 E. Highway 290, STE. 200

Austin, Texas 78723-1035

Phone: (512) 936-7700

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

### LICENSEE MEDICAL CONDITION DECLARATION (L-2)

Occupations Code § 1701.306; Commission Rules §§ 217.1, 217.7

#### INDIVIDUAL INFORMATION (TO BE COMPLETED BY ACADEMY OR AGENCY)

1. TCOLE PID	2. INDIVIDUAL LAST NAME	3. INDIVIDUAL FIRST NAME	4. M.I.	5. SUFFIX (Jr., etc.)
6. HOME MAILING ADDRESS		7. CITY	8. STATE	9. ZIP CODE
				10. EMAIL
11. LICENSE TYPE SOUGHT (FOR STUDENT SEEKING ENROLLMENT IN ACADEMY – DO NOT CHECK IF SEEKING APPOINTMENT)				
<input type="checkbox"/> PEACE OFFICER <input type="checkbox"/> COUNTY JAILER <input type="checkbox"/> TELECOMMUNICATOR (DRUG SCREEN ONLY)				
12. APPOINTMENT TYPE(S) SOUGHT (FOR LICENSEE SEEKING APPOINTMENT WITH AGENCY – DO NOT CHECK IF SEEKING ENROLLMENT)				
<input type="checkbox"/> PEACE OFFICER <input type="checkbox"/> RESERVE OFFICER <input type="checkbox"/> COUNTY JAILER <input type="checkbox"/> PUBLIC SECURITY OFFICER				
<input type="checkbox"/> TELECOMMUNICATOR (DRUG SCREEN ONLY)				
13. EXAMINATION REQUESTED				
<input type="checkbox"/> MEDICAL EXAMINATION AND DRUG SCREEN (For academy enrollment, initial appointment after 180 days from academy graduation, withdrawn or invalidated L-2, or appointment upon agency request)		<input type="checkbox"/> DRUG SCREEN ONLY (For subsequent appointments after a 180-day break in service or Telecommunicators)		

#### ACADEMY OR AGENCY INFORMATION (TO BE COMPLETED BY ACADEMY OR AGENCY)

14. TCOLE NUMBER	15. ACADEMY OR AGENCY NAME	16. EMAIL
511271	Southwest Texas College - Law Enforcement Academy	ezamora@swtxc.edu
17. MAILING ADDRESS	18. CITY	19. STATE
2401 Garner Field Road	Uvalde	TX
		20. ZIP CODE
		78801
		21. PHONE NUMBER
		(830) 591-7348

#### INDIVIDUAL ACKNOWLEDGEMENT AND RELEASE (TO BE COMPLETED BY INDIVIDUAL)

22. I hereby authorize the release of the results of this medical examination, drug screen, or both, and any other relevant information to the above requesting academy or law enforcement agency and the Texas Commission on Law Enforcement.		
INDIVIDUAL NAME (TYPE OR PRINT)	INDIVIDUAL SIGNATURE	DATE

**Attention Requesting Academy or Agency and Examining Practitioner:** State Law and Commission Rules require that a medical examination and drug screen be performed by a physician licensed in Texas. TCOLE policy allows a physician's assistant or a nurse practitioner licensed in Texas and working under the supervision of a physician licensed in Texas to perform the medical examination and drug screen. TCOLE policy allows a Department of Transportation (DoT) Provider to perform the drug screen.

**Requesting Academy or Agency:** After the above sections are completed, submit this form by mail or email to the practitioner selected by the academy or agency to perform the medical examination, drug screen, or both. For a medical examination, also submit a description of job duties for the license or appointment sought to the practitioner.

**Examining Practitioner:** The medical examination process must consist of a review of the description of job duties for the license or appointment sought. Given the nature of law enforcement and the potential consequences to the agency, the individual, and the public, the purpose of the medical examination and drug screen is to determine whether the individual is physically sound and free from any defect which may adversely affect the performance of duties appropriate to the type of license or appointment sought and whether the individual shows traces of drug dependency or illegal drug use.

#### MEDICAL EXAMINATION (TO BE COMPLETED BY PRACTITIONER)

23. Practitioner License Type					
<input type="checkbox"/> PHYSICIAN <input type="checkbox"/> PHYSICIAN'S ASSISTANT <input type="checkbox"/> NURSE PRACTITIONER					
24. PRACTITIONER LAST NAME	25. PRACTITIONER FIRST NAME	26. LICENSE NUMBER	27. EMAIL		
28. MAILING ADDRESS	29. CITY	30. STATE	31. ZIP CODE	32. PHONE NUMBER	

33. DESCRIPTION OF TESTS PERFORMED AND CONCLUSIONS, INCLUDING ANY EXISTING CONDITIONS OR RESTRICTIONS (ATTACH ADDITIONAL PAGES AS NEEDED)

34. DATE MEDICAL EXAMINATION PERFORMED:

35. I certify that I have completed a medical examination of the above-named individual. I have concluded that the individual:



**IS**

physically sound and free from any defect which may adversely affect the performance of duties appropriate to the type of license or appointment sought.



**IS NOT**

physically sound and free from any defect which may adversely affect the performance of duties appropriate to the type of license or appointment sought.

PRACTITIONER NAME (TYPE OR PRINT)

PRACTITIONER SIGNATURE

DATE

**STATE LAW AND COMMISSION RULES REQUIRE THAT A MEDICAL EXAMINATION BE PERFORMED BY A PHYSICIAN LICENSED IN TEXAS. TCOLE POLICY ALLOWS A PHYSICIAN'S ASSISTANT OR A NURSE PRACTITIONER LICENSED IN TEXAS AND WORKING UNDER THE SUPERVISION OF A PHYSICIAN LICENSED IN TEXAS TO PERFORM THE MEDICAL EXAMINATION. THIS FORM IS ONLY VALID IF SIGNED BY THE APPROPRIATE PRACTITIONER.**

### DRUG SCREEN (TO BE COMPLETED BY PRACTITIONER)

36. Practitioner Type

☐ PHYSICIAN      ☐ PHYSICIAN'S ASSISTANT      ☐ NURSE PRACTITIONER      ☐ DOT PROVIDER

37. PRACTITIONER LAST NAME	38. PRACTITIONER FIRST NAME	39. LICENSE NUMBER	40. EMAIL	
41. MAILING ADDRESS		42. CITY	43. STATE	44. ZIP CODE
				45. PHONE NUMBER

46. DATE DRUG SCREEN PERFORMED:

47. I certify that I have completed a drug screen of the above-named individual. I have concluded after a blood test or other medical test that the individual:



shows no trace of drug dependency or illegal drug use.



shows traces of drug dependency or illegal drug use.

PRACTITIONER NAME (TYPE OR PRINT)

PRACTITIONER SIGNATURE

DATE

**STATE LAW AND COMMISSION RULES REQUIRE THAT A DRUG SCREEN BE PERFORMED BY A PHYSICIAN LICENSED IN TEXAS. TCOLE POLICY ALLOWS A PHYSICIAN'S ASSISTANT OR A NURSE PRACTITIONER LICENSED IN TEXAS AND WORKING UNDER THE SUPERVISION OF A PHYSICIAN LICENSED IN TEXAS TO PERFORM THE DRUG SCREEN, AS WELL AS A DOT PROVIDER. THIS FORM IS ONLY VALID IF SIGNED BY THE APPROPRIATE PRACTITIONER.**

**Examining Practitioner:** After completing the above requested examination sections, return this form and any additional documents by mail or email to the requesting academy or law enforcement agency. If the individual is determined to not be physically sound or free from any defect which may adversely affect the performance of duties or shows traces of drug dependency or illegal drug use, please submit this form to TCOLE at [fitforduty@tcole.texas.gov](mailto:fitforduty@tcole.texas.gov).

**Requesting Academy or Agency:** If the individual is determined to not be physically sound or free from any defect which may adversely affect the performance of duties or shows traces of drug dependency or illegal drug use, submit this form to TCOLE at [fitforduty@tcole.texas.gov](mailto:fitforduty@tcole.texas.gov) within 30 days of the examination.

This L-2 Form remains valid for 180 days from the individual's graduation date from the academy, if accepted by the appointing agency, or is valid for 180 days from the date signed by the practitioner, unless withdrawn or invalidated.

THIS DOCUMENT IS CONFIDENTIAL AND NOT SUBJECT TO DISCLOSURE  
UNDER THE PUBLIC INFORMATION ACT, GOVERNMENT CODE CHAPTER 552.

## TEXAS COMMISSION ON LAW ENFORCEMENT

6330 E. Highway 290, STE. 200  
Austin, Texas 78723-1035  
Phone: (512) 936-7700  
<https://www.tcole.texas.gov>

### LICENSEE PSYCHOLOGICAL AND EMOTIONAL HEALTH DECLARATION (L-3)

Occupations Code § 1701.306; Commission Rules §§ 217.1, 217.7, 221.35, 227.4

#### INDIVIDUAL INFORMATION (TO BE COMPLETED BY ACADEMY OR AGENCY)

1. TCOLE PID	2. INDIVIDUAL LAST NAME	3. INDIVIDUAL FIRST NAME	4. M.I.	5. SUFFIX (Jr., etc.)
6. HOME MAILING ADDRESS	7. CITY	8. STATE	9. ZIP CODE	10. EMAIL
11. LICENSE TYPE SOUGHT (FOR STUDENT SEEKING ENROLLMENT IN ACADEMY – DO NOT CHECK IF SEEKING APPOINTMENT)				
<input type="checkbox"/> PEACE OFFICER <input type="checkbox"/> COUNTY JAILER <input type="checkbox"/> TELECOMMUNICATOR <input type="checkbox"/> SCHOOL MARSHAL				
12. APPOINTMENT TYPE(S) SOUGHT (FOR LICENSEE SEEKING APPOINTMENT WITH AGENCY – DO NOT CHECK IF SEEKING ENROLLMENT)				
<input type="checkbox"/> PEACE OFFICER <input type="checkbox"/> RESERVE OFFICER <input type="checkbox"/> COUNTY JAILER <input type="checkbox"/> TELECOMMUNICATOR				
<input type="checkbox"/> SCHOOL MARSHAL <input type="checkbox"/> PUBLIC SECURITY OFFICER <input type="checkbox"/> JUVENILE PROBATION OFFICER				

#### ACADEMY OR AGENCY INFORMATION (TO BE COMPLETED BY ACADEMY OR AGENCY)

13. TCOLE NUMBER	14. ACADEMY OR AGENCY NAME	15. EMAIL		
511271	Southwest Texas College - Law Enforcement Academy	ezamora@swtxc.edu		
16. MAILING ADDRESS	17. CITY	18. STATE	19. ZIP CODE	20. PHONE NUMBER
2401 Garner Field Road	Uvalde	TX	78801	(830) 591-7348

#### INDIVIDUAL ACKNOWLEDGEMENT AND RELEASE (TO BE COMPLETED BY INDIVIDUAL)

21. I hereby authorize the release of my Personal History Statement and any other background investigation documents to the examining practitioner. I also hereby authorize the release of the results of this psychological examination and any other relevant information to the above requesting academy or law enforcement agency and the Texas Commission on Law Enforcement.		
INDIVIDUAL NAME (TYPE OR PRINT)	INDIVIDUAL SIGNATURE	DATE

**Attention Requesting Academy or Agency and Examining Practitioner:** State Law and Commission Rules require that a psychological examination be performed by a psychologist or psychiatrist licensed in Texas, except in exceptional circumstances when, upon prior approval by TCOLE, it may be performed by a qualified physician licensed in Texas. The chief administrator of the requesting agency must request prior approval in writing and must receive written approval from TCOLE before a psychological examination performed by a physician is acceptable.

**Requesting Academy or Agency:** After the above sections are completed, submit this form along with a description of job duties for the license or appointment sought, a copy of the individual's Personal History Statement, and any background investigation documents (if applicable) by mail or email to the practitioner selected by the academy or agency.

**Examining Practitioner:** The psychological examination must be conducted pursuant to professionally recognized standards and methods. The examination process must consist of a review of the description of job duties for the license or appointment sought, a review of the Personal History Statement, and a review of any background investigation documents (if applicable). The examination must consist of at least two instruments, one which measures personality traits and one which measures psychopathology, and a face-to-face interview conducted after the instruments have been scored. Given the nature of law enforcement and the potential consequences to the agency, the individual, and the public, the purpose of the psychological examination is to determine whether the individual is in satisfactory psychological and emotional health to serve as the type of law enforcement officer for which the license or appointment is sought.

**PSYCHOLOGICAL AND EMOTIONAL HEALTH EXAMINATION (TO BE COMPLETED BY PRACTITIONER)**

22. PRACTITIONER LICENSE TYPE				
<input type="checkbox"/> PHYSICIAN		<input type="checkbox"/> PSYCHOLOGIST		<input type="checkbox"/> PSYCHIATRIST
23. PRACTITIONER LAST NAME	24. PRACTITIONER FIRST NAME	25. LICENSE NUMBER	26. EMAIL	
27. MAILING ADDRESS		28. CITY	29. STATE	30. ZIP CODE
				31. PHONE NUMBER
32. DESCRIPTION OF TESTS OR METHODOLOGIES PERFORMED AND CONCLUSIONS, INCLUDING ANY EXISTING CONDITIONS (ATTACH ADDITIONAL PAGES AS NEEDED)				
33. DATE PSYCHOLOGICAL EXAMINATION PERFORMED:				
34. I certify that I have completed a psychological and emotional health examination of the above-named individual pursuant to professionally recognized standards and methods. I have concluded that the individual:				
<input type="checkbox"/> <b>IS</b> in satisfactory psychological and emotional health to serve as the type of licensee for the license or appointment sought.		<input type="checkbox"/> <b>IS NOT</b> in satisfactory psychological and emotional health to serve as the type of licensee for the license or appointment sought.		
PRACTITIONER NAME (TYPE OR PRINT)		PRACTITIONER SIGNATURE		DATE
<b>STATE LAW AND COMMISSION RULES REQUIRE THAT A PSYCHOLOGICAL EXAMINATION BE PERFORMED BY A PSYCHOLOGIST OR PSYCHIATRIST LICENSED IN TEXAS, OR BY A QUALIFIED PHYSICIAN LICENSED IN TEXAS WITH PRIOR APPROVAL FROM TCOLE. THIS FORM IS ONLY VALID IF SIGNED BY THE APPROPRIATE PRACTITIONER.</b>				

**Examining Practitioner:** After completing the above examination section, return this form and any additional documents by mail or email to the requesting academy or law enforcement agency. If the individual is determined to not be in satisfactory psychological or emotional health to serve, please submit this form to TCOLE at [fitforduty@tcole.texas.gov](mailto:fitforduty@tcole.texas.gov).

**Requesting Academy or Agency:** If the individual is determined to not be in satisfactory psychological or emotional health to serve, submit this form to TCOLE at [fitforduty@tcole.texas.gov](mailto:fitforduty@tcole.texas.gov) within 30 days of the examination.

For school marshal applicants and licensees, this L-3 Form remains valid for 90 days from the date signed by the practitioner, unless withdrawn or invalidated. For all other applicants and licensees, this L-3 Form remains valid for 180 days from the individual's graduation date from the academy, if accepted by the appointing agency, or is valid for 180 days from the date signed by the practitioner, unless withdrawn or invalidated.

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UNDER THE PUBLIC INFORMATION ACT, GOVERNMENT CODE CHAPTER 552.



## Southwest Texas College Law Enforcement Academy

2401 Garner Field Road  
Uvalde, Texas 78801  
PH: (830) 591-4158  
Fax: (830) 591-4159



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- |                       |   |
|-----------------------|---|
| • Emmanuel Zamora     | <b>830-591-7348</b> <ul style="list-style-type: none"><li>• Academy Interim Coordinator</li><li>• Email: <a href="mailto:ezamora@swtxc.edu">ezamora@swtxc.edu</a></li></ul>                     |
| • Jose M. Cervantes   | <b>830-591-7248</b> <ul style="list-style-type: none"><li>• Academy Instructor</li><li>• Email: <a href="mailto:jmcervantes@swtxc.edu">jmcervantes@swtxc.edu</a></li></ul>                      |
| • Beco M. Diaz        | <b>830-591-7314</b> <ul style="list-style-type: none"><li>• Academy Instructor</li><li>• Email: <a href="mailto:bmdiaz@swtxc.edu">bmdiaz@swtxc.edu</a></li></ul>                                |
| • Amy R. Gonzalez     | <b>830-591-4158</b> <ul style="list-style-type: none"><li>• Academy Instructor (Eagle Pass)</li><li>• Email: <a href="mailto:argonzalez19329@swtxc.edu">argonzalez19329@swtxc.edu</a></li></ul> |
| • Teresa H. Zamarripa | <b>830-591-4158</b> <ul style="list-style-type: none"><li>• Academy Administrative Assistant</li><li>• Email: <a href="mailto:thzamarripa@swtxc.edu">thzamarripa@swtxc.edu</a></li></ul>        |
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### For Physical & Drug Screen Testing - L-2 Form

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**Little Alsace Urgent Care Center**  
3040 E. Main St., Suite Z  
Uvalde, Texas 78801  
**Phone (830) 900-7048**

**Santana Family Care Center**  
1995 William St., Suite C  
Eagle Pass, Texas 78852  
**Phone (830) 776-5348**

**Dr. David H. Cruz**  
1811 N. Arkansas Ave.  
Laredo, Texas 78043  
**Phone (956) 722-9955**

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### For Psychological Exam - L-3 Form

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**Paul S. McCollum, Ph.D.**  
816 Camaron Drive, Suite 236  
San Antonio, Texas 78212  
**Phone (210) 733-1892**  
Email: [mccollum.paul@gmail.com](mailto:mccollum.paul@gmail.com)