



Police Officer Standards and Training Commission
1128 South Bradford Street | Dover, DE 19901 | (302) 244-3678
Please email completed forms to POST@delaware.gov

REQUEST FOR POST TRAINING RECORDS

ALL FIELDS MUST BE COMPLETED

All records requests will be reviewed upon receipt. Once approved, the requested records will be delivered within seven (7) business days. If additional time is required to process the request, you will be notified accordingly.

SECTION I: INDIVIDUAL REQUESTING RECORDS

<u>NAME</u>	<u>MAIDEN NAME (IF APPLICABLE)</u>	<u>DATE OF BIRTH</u>
<u>E-MAIL ADDRESS</u>	<u>TELEPHONE #:</u>	<u>POST NUMBER</u>
<u>MAILING ADDRESS (Include: Street, Town/City; State; Zip)</u>		

SECTION II: AGENCY REQUEST FOR RECORDS (FOR LAW ENFORCEMENT AGENCIES ONLY)

<u>NAME OF AGENCY</u>	<u>TELEPHONE #:</u>	<u>FAX #:</u>
<u>NAME OF REQUESTOR</u>	<u>REQUESTOR EMAIL ADDRESS</u>	
<u>AGENCY MAILING ADDRESS (Include: Street; Building, Town/City; State; Zip)</u>		

SECTION III: ACKNOWLEDGEMENTS

By signing this form, you acknowledge that the information you receive may be shared with agency personnel as necessary for processing and administrative purposes. Additionally, you understand that the POST Commission is not responsible for the use or dissemination of the information once it is provided.

POST reserves the right to request additional information or deny a records request.

Please select how you would like to receive the request records:

☐ Email

☐ Fax

☐ Certified Mail

Printed Name: _____

Signature: _____

Date: _____

FOR POST PERSONNEL USE ONLY

Date Received: _____

Received By: _____

Request: ☐ Approved ☐ Denied