



Maryland Police & Correctional Training Commissions

6852 4th Street, Sykesville, MD 21784 • (410) 875-3400 • Email: MPCTC.certifications@maryland.gov

NOTICE OF PERSONNEL ACTION FORM

Please Type or Print clearly

Form with fields: Applicants Last Name, MI, First Name, Certification Number, Date of Action, Agency Name, Agency Code.

I. Separation of Employment (check one):

- Resignation, Retirement, Termination, Deceased (Condition not required)

Condition of Separation (check one):

- General (separated in good standing), Administrative investigation or charge, Reclassified to non-mandated/non-sworn position, Criminal investigation or charge, Withdrawn/Incomplete Academy, Felony or misdemeanor conviction, Unsatisfactory during Probationary Period, Medical

II. Assigned to Non-Officer Status (non-active duty) due to departmental suspension:

- Administrative investigation or charge, Criminal investigation or charge, Disciplinary suspension

III. Assigned to Non-Officer Status (non-active duty):

- Military, Medical, Reassigned to non-mandated/non-sworn duty (temporary)

IV. Active Status

Returned from non-officer status or departmental suspension

V. Promotion to Rank:

- No change in supervisory/administrative duties, To first line supervisor (first line supervisor training required), To first line administrator (first line admin. training required), Over the rank of first line supervisor, Over the rank of first line administrator

VI. Demoted to Rank: (if first line supervisor or below).

VII. Name Change to: Last Name, MI, First Name

VIII. Transfers (only agencies approved for transfers): To Agency: Agency Code:

NOTE: Information submitted to MPCTC is subject to the Public Information Act (State Gov't Art. §10-611 et seq.), and is not bound by agreements made by law enforcement units, mandated personnel, or others about the confidentiality of this information.

I hereby affirm that the information provided on this Notice of Personnel Action form is true and accurate to the best of my knowledge and contains no willful misrepresentation or falsification. I am aware that any misrepresentation or falsification of this information may subject me to prosecution pursuant to Md. Code Ann., Crim. Law §8-606.

Signature line with fields: Print or Type Name, Signature, Date, Contact email, Phone number