



Fulton County Public Safety Training Center

Student Authorization Form

Application Must Be Received 10 Days Prior to Course Start Date

Please Type or Print Clearly

Course Title: _____ Course Date(s) _____ - _____

Employing Agency: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Agency Fax #: _____ Phone#: _____ Agency e-mail: _____

Training Coordinator: _____ Training Coordinator e-mail: _____

Authorizing Signature: _____ Date: _____

Submission of incorrect data may be grounds for investigations/dismissal from class

To enroll student (s) in the indicated course above, an Okey number should be listed in the designated space below:

Name: _____ OKEY#: O _____ Sworn _____ Certified _____ Support Personnel _____

Name: _____ OKEY#: O _____ Sworn _____ Certified _____ Support Personnel _____

Name: _____ OKEY#: O _____ Sworn _____ Certified _____ Support Personnel _____

Name: _____ OKEY#: O _____ Sworn _____ Certified _____ Support Personnel _____

Name: _____ OKEY#: O _____ Sworn _____ Certified _____ Support Personnel _____

You MUST PROVIDE AN OKEY NUMBER FOR EACH APPLICANT. AN AUTHORIZING OFFICIAL MUST SIGN ALL APPLICATIONS BEFORE IT CAN BE PROCESSED. If the student is not confirmed for this class before the start date, the application will be cancelled. All Cancellations must be done by fax or U.S. Mail. No phone cancellations will be accepted.

SUBMIT ALL COMPLETED APPLICATIONS TO:

Attention: Registrar

Fulton County Public Safety Training Center

3025 Merk Road

College Park, Georgia 30349-2350

FAX (404) 612-0468

A hard/fax copy with the Training Coordinator/Agency Head Approval must be received prior to confirmation.

All monies are non-refundable and must be paid by certified check or money order on the first day of class.