



# Vermont Criminal Justice Council Employment Change Notification Form

This form is to be filled out within **ten (10) business days** of the appointment or removal of an elected or appointed official, to include: constables, police chiefs, municipal police officers, state law enforcement officers, and sheriff's officers.

## Personally Identifiable Information

Last Name	First Name	M.I
Agency	DOB	Last 4 SS

## Appointment of Duty

The above named officer (Check appropriate box)

- Hired Rank \_\_\_\_\_ Certification Level of Officer \_\_\_\_\_
- Has changed in rank from \_\_\_\_\_ to \_\_\_\_\_
- Returning from extended leave. Type of Leave \_\_\_\_\_
- Other (Explain)

## Separation of Duty

The above named officer (Check appropriate box)

- Resigned     Retired     Discharged     Deceased     Other: \_\_\_\_\_
- Failed to successfully complete probationary period:     Resigned     Discharged

## Constables

The above named individual has been (Check appropriate box)  Elected     Appointed

Constable for the Town of \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

- Will     Will Not—be exercising law enforcement powers as a Constable.

## Name Change

Please note the following name change (new name):

Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

## Agency Head or Designee Use Only:

- Before hiring I have contacted prior law enforcement agencies for background information ([20 V.S.A. § 2362a](#))

Effective Date of Changes: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_ Title: \_\_\_\_\_

**Send completed form to the Academy's Administrative Services Coordinator:**  
Mail: 317 Academy Rd. Pittsford, VT 05763    Email: [jennifer.hier@vermont.gov](mailto:jennifer.hier@vermont.gov)    Fax: (802) 483-2343