## **TEXAS COMMISSION ON LAW ENFORCEMENT**

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

## **COLLEGE EDUCATION REQUEST (F-7)**

Form can be sent electronically from your department TCLEDDS system.

Non-refundable \$35 fee for paper form. Money order, agency or cashier's check. (5591)

## ONLY ORIGINAL TRANSCRIPTS WILL BE ACCEPTED. EMAILED OR COPIED TRANSCRIPTS WILL BE RETURNED.

STUDENT INFORMATION									
1. TCOLE PID	COLE PID 2. Last Name 3. First		3. First Nam	lame		4. M	.I. 5. Suffix (Jr., etc.)		r., etc.)
6. Date of Birth		7. Home Mailing Address		8. City		9. \$	State	10. Zi	p Code
		-		,					
11. Phone Number (include area code)				12. Email					
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DEPARTMENT INFORMATION									
13. TCOLE Agency Number 14. Appointing Agency				15. Agency Mailing Address					
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16. City		17. County		18. Zip Code	19. Pt	hone Numbe	er		
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			COLLEGE	INFORMATION	<u> </u>				
20. COLLEGE -	List all college	es/universities *	COLLEGE	City and State			Degree Awarded**		Hours
Ţ									
			**College cre	credit, Assoc., Bachelors, Doctorate, Masters			TOTAL HOURS		
Submission of this form deletes all previous college information from the licensee's record and replaces it with the information provided above. DO NOT duplicate transfer hours. Documented hours must either be a passing letter grade or pass. Credit will not be awarded for failing courses, withdrawn or audit courses.									
211.1(3) An institution of higher education that is accredited or authorized by;									
Accrediting Commission for Community and Junior Colleges Western Association of Schools and Colleges (ACCJC), Higher Learning Commission (HLC), Middle States Commission on Higher Education (MSCHE), New England Commission of Higher Education (NECHE), Northwest Commission on Colleges and Universities (NWCCU), Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), WASC Senior College and University Commission (WSCUC)									
		these hours are from an ac t document and under per							
SIGNATURE	OFLICEN	SE HOLDER	_		DA	TE			
		signee, attest that these ho or basic peace office class.		requirements of	211.1(a)(3)	). College	hours a	are not bein	g submitted
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ADMINISTRATOR SIGNATURE

AGENCY ADMINISTRATOR (Type or Print)

DATE