



TEXAS DEPARTMENT OF PUBLIC SAFETY
STUDENT REGISTRATION FORM

STUDENT INFORMATION (Please PRINT or TYPE all information)					
Course Name		Course Location			
Last Name		First Name			
Rank/Title		Agency			
Mailing Address					
City		ST		Zip	
Cell Phone #					
TCOLE PID OR Last 4 Digits of SSN if Non-Commissioned				D.O.B	
Email Address					

- ❖ Please email completed registration forms to Jane.Cox@dps.texas.gov
- ❖ If there is tuition for this course please make checks payable to the Texas Department of Public Safety and mail to:

Texas Department of Public Safety
ATT: Lt. Derek Prestridge or Janeé Cox
5805 North Lamar Boulevard
Building C
Austin, TX 78752