

## REPORT OF BATON PERMITS ISSUED

This report, also referred to as a roster, must be completed and sent to the Bureau within five working days following the issuance of baton permits (Business and Professions Code section 7585.14 (c)). **This roster must be typed.** This report is also to be used to report voided permits.

1. DATE PERMIT ISSUED		2. INSTRUCTOR NAME			
3. BATON FACILITY NAME		4. FACILITY CERTIFICATE NUMBER		5. INSTRUCTOR CERTIFICATE NUMBER	
6. BATON PERMIT NO.	7. NAME OF TRAINEE: LAST            FIRST            M.	8. DATE OF BIRTH	9. RESIDENCE ADDRESS: (Include no. and street, city, state, and zip)	10. SOCIAL SECURITY NO. OR INDIVIDUAL TAXPAYER IDENTIFICATION NO.	11. SECURITY GUARD REGISTRATION NO.

**SIGNATURE OF INSTRUCTOR REQUIRED ON REVERSE SIDE**

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<b>3. BATON FACILITY NAME</b>		<b>4. FACILITY CERTIFICATE NUMBER</b>		<b>5. INSTRUCTOR CERTIFICATE NUMBER</b>		
<b>6. BATON PERMIT NO.</b>	<b>7. NAME OF TRAINEE:</b> LAST            FIRST            M.	<b>8. DATE OF BIRTH</b>	<b>9. RESIDENCE ADDRESS:</b> (Include no. and street, city, state, and zip)		<b>10. SOCIAL SECURITY NO. OR INDIVIDUAL TAXPAYER IDENTIFICATION NO.</b>	<b>11. SECURITY GUARD REGISTRATION NO.</b>

I certify under penalty of perjury, under the laws of the State of California, that the listed permits were issued in accordance with section 7585.14 of the Business and Professions Code and that I was the instructor of said baton training course.

\_\_\_\_\_  
**INSTRUCTOR SIGNATURE**

\_\_\_\_\_  
**DATE**

Pursuant to Business and Professions Code section 30, providing your social security number or individual taxpayer identification number is mandatory and will be used exclusively for tax enforcement purposes and for compliance with any judgment or order for family support in accordance with section 17520 of the Family Code. Your social security number or individual taxpayer identification number may also be used for verification of licensure or examination status for national examination where licensure is reciprocal with a requesting state. If you fail to provide your social security number or individual taxpayer identification number, you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.

Pursuant to the California Public Records Act (Gov. Code § 6250 et seq.) and the Information Practices Act (Civ. Code § 1798.61), the names and addresses of persons possessing a license or registration may be disclosed by the Department unless otherwise specifically exempt from disclosure under the law. We make every effort to protect the personal information you provide us. The information you provide, however, may be disclosed in response to a court or administrative order, a subpoena, or a search warrant.

Per the Information Practices Act, the Chief of the Bureau of Security and Investigative Services, Department of Consumer Affairs, is responsible for maintaining the information in this application. You have the right to review the records maintained on you by the Bureau or Department unless the records are exempt from disclosure by section 1798.40 of the Civil Code. Your completed application becomes the property of the Bureau and will be used by authorized personnel to determine your eligibility for a license, registration or permit. Information on your application may be transferred to other governmental or law enforcement agencies, as permitted by law.

For questions about this notice or access to your record, you may contact the Bureau of Security and Investigative Services, Attn: Public Records Liaison, P.O. Box 980550, Sacramento, CA 95798-0550, by phone at (916) 322-4000 or (800) 952-5210, or by e-mail at [bsis@dca.ca.gov](mailto:bsis@dca.ca.gov). For questions about the Department's Privacy Policy, you may contact the Department of Consumer Affairs at 1625 North Market Boulevard, Sacramento, CA 95834, by phone at (800) 952-5210 or by e-mail at [dca@dca.ca.gov](mailto:dca@dca.ca.gov).