

## NOTIFICATION OF TERMINATION FOR EMPLOYEE REGISTRATION

**Note: All employees terminated with an effective date of March 1, 2009 and with the submission of the PSB-19B will be entered into PSB database. All employees terminated before March 1, 2009, please do not submit any form or list. The employees terminated before March 1, 2009 will be processed through our archival procedure.**

- No Fee Required
- I understand a termination form shall be required on each employee terminated. (**Note: A list of terminated employees not on a prescribed form by the Bureau will not be processed**).
- I understand a termination form not filled out in its entirety or pertinent information not submitted will not be processed by PSB.
- I understand PSB will not be able to process a termination form due to the following situations: (1) a pre-dated termination form; (2) an employee who worked for your company but never submitted an Original registration or Employee Information Update with PSB. (**Please check employment status by visiting the PSB website at [www.txdps.state.tx.us/psb/company/company\\_search.aspx](http://www.txdps.state.tx.us/psb/company/company_search.aspx).**)
- (**Note: A notification for termination merely states an employee was terminated by the current employer however a termination does not remove the individual from the company employee list.**)

**For Employee Registration termination, please check all that apply:**

- |   |   |
|---|---|
| <input type="checkbox"/> Alarm Salesperson  | <input type="checkbox"/> Gov. Letter of Authority Non-Commissioned Security Officer |
| <input type="checkbox"/> Alarm Systems Installer  | <input type="checkbox"/> Gov. Letter of Authority Commissioned Security Officer     |
| <input type="checkbox"/> Alarm Systems Monitor  | <input type="checkbox"/> Gov. Letter of Authority Personal Protection Officer       |
| <input type="checkbox"/> Branch Office Manager  | <input type="checkbox"/> Locksmith  |
| <input type="checkbox"/> CE Instructor  | <input type="checkbox"/> Non-Commissioned Security Officer                          |
| <input type="checkbox"/> Commissioned Security Officer  | <input type="checkbox"/> Personal Protection Officer                                |
| <input type="checkbox"/> Electronic Access Control Device Installer (Includes Gate Operators) | <input type="checkbox"/> Private Investigator                                       |
| <input type="checkbox"/> Employee of License Holder (formerly Administrative Security Person) | <input type="checkbox"/> Security Consultant  |
| <input type="checkbox"/> Guard Dog Trainer  | <input type="checkbox"/> Security Salesperson                                       |

**Note: If you are terminating a Commissioned Security Officer registration and the employee also has a Personal Protection Officer registration with your company both registrations will be terminated.**

Pocket card enclosed

Pocket card not returned

**(Please Print or Type Information)**

Company Lic. Number: \_\_\_\_\_ Ceased employment with: \_\_\_\_\_  
Name of Company/School

Terminated Employee Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
Last First MI

Effective Date of Termination: \_\_\_\_\_

Name of Manager or Owner: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please print or Type Name)

Signature of Owner or Manager: \_\_\_\_\_

**NOTICE: THIS IS A GOVERNMENTAL RECORD.  
ANY FALSE ENTRY MADE ON THIS DOCUMENT COULD BE CONSIDERED A CRIMINAL VIOLATION.**