

AFFIDAVIT OF SEPARATION

POST 2-357 (05/2024)

Page 1 of 3

INFORMATION PRIVACY ACT: Pursuant to the Federal Privacy Act (Public Law 93-579) and the Information Practices Act (IPA) of 1977 (Civil Code Sections 1798, et seq.), notice is hereby given for the request of personal information. Failure to provide any part of the requested information may delay processing of this application or result in an incomplete record. No disclosure of personal information will be made unless permissible under Article 6, Section 1798.24 of the IPA of 1977. Each individual for whom personal information is collected has the right to inspect that information in any record maintained by POST. Inquiries may be directed to the POST Information Practices Act Coordinator at the address listed above or may be emailed to CPRA@post.ca.gov.

SECTION 1: IDENTIFICATION

1. POST ID NUMBER (OR SSN)	2. NAME (Last, First, Middle)	3. BIRTHDATE (MM/DD/YYYY)
4. GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary	5. ALSO KNOWN AS (Last, First, Middle)	FOR POST USE ONLY
6. ADDRESS		
7. RACE/ETHNICITY (Check box that best describes race/ethnicity — See INSTRUCTIONS for Definitions) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Filipino <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Other		
8. RANK / CLASSIFICATION (Select and enter the POST Code from the list — See INSTRUCTIONS for Rank/Class)	9. AGENCY NAME	

SECTION 2: TERMINATION / SEPARATION

10. DATE OF FINAL SEPARATION (MM/DD/YYYY)	11. TYPE OF SEPARATION <input type="checkbox"/> Retired <input type="checkbox"/> Resigned <input type="checkbox"/> Deceased <input type="checkbox"/> Involuntary Separation <input type="checkbox"/> Did not complete probation <input type="checkbox"/> Separated Pending Complaint, Administrative Charge, or Investigation for serious misconduct
12. RESOLUTION OR SETTLEMENT Was the reason for separation part of a resolution or settlement? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please check the appropriate box: <input type="checkbox"/> Criminal Charge or Investigation <input type="checkbox"/> Civil Charge or Investigation <input type="checkbox"/> Administrative Charge or Investigation	13. REASON FOR SEPARATION DUE TO SERIOUS MISCONDUCT PER PC 13510.8(b) Indicate Reason(s) For Discharge Related to Misconduct (Choose all that apply) <input type="checkbox"/> Dishonesty <input type="checkbox"/> Abuse of Power <input type="checkbox"/> Physical Abuse <input type="checkbox"/> Sexual Assault <input type="checkbox"/> Demonstrating Bias <input type="checkbox"/> Egregious Repeated Acts <input type="checkbox"/> Law Enforcement Gang <input type="checkbox"/> Failure to Cooperate with Investigation <input type="checkbox"/> Failure to Intercede
14. REASON FOR SEPARATION OTHER THAN SERIOUS MISCONDUCT:	

SECTION 3: NOTICE TO SEPARATING OFFICER

15. NOTICE TO OFFICER

The peace officer has been advised of their right to respond in writing to this Affidavit of Separation to the commission if the facts and reasons as they understand them are different than those provided by the agency.

Was the peace officer provided a copy of this completed form? Yes No

If yes, what manner was the form provided to the peace officer? In Person Mail Certified Mail
 Other (Specify) _____

Name of the person providing notice: _____ Date _____

Peace officer's acknowledgement of personal service: _____ Date _____

SECTION 3: NOTICE TO SEPARATING OFFICER (continued)

If service was by mail, certified mail, or other courier service, affix the receipt (proof of mailing) below:

SECTION 4: AGENCY HEAD OR THEIR DESIGNEE

16. ATTESTATION OF REPORTING OFFICIAL

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this affidavit (declaration) was executed on the date listed below.

Print Full Name: _____ Title: _____ Contact Number () _____

Signature ► _____

Date: _____

INSTRUCTIONS – [Back to Form](#)

- Complete Section 1—Identification, Section 2—Termination/Separation, Section 3—Notice to Separating Officer and Section 4—Agency Head or Their Designee. (NOTE: References to Penal Code sections are noted as “PC”.)
- Please type or legibly print (in ink) all required information. Use the TAB key (or Shift-tab) to navigate between boxes.
- Upload a printout of this Notice to the Electronic Data Interchange (EDI) within 10 days of separation.

SECTION 1: IDENTIFICATION

Use these instructions to assist you in completing this section of the form.

Box 1. The separating peace officers POST ID number or Social Security Number shall be listed.

Box 6. This shall be the physical address of record for the peace officer separating from employment. A P.O. Box will not be accepted.

Box 7. Use these definitions to assist you in selecting the category that best describes the appointee’s race/ethnicity.

American Indian or Alaska Native

A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian

A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, Thailand, and Vietnam.

Black or African American

A person having origins in any of the black racial groups of Africa.

Filipino

A person having origins in any of the original peoples of the Philippine Islands.

Hispanic or Latino

A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Native Hawaiian or Other Pacific Islander

A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White

A person having origins in any of the original peoples of Europe, Middle East, or North Africa.

Box 8. Use this list to select the POST code for the appointee’s rank/classification. This code will appear on the appointee’s Peace Officer Profile (P101) in the Rank column under the Employment section.

INSTRUCTIONS (continued) – [Back to Form](#)

Rank/Classification	POST Code	Rank/Classification	POST Code	Rank/Classification	POST Code
Acting Chief	ACTC	Dispatcher (I, II, III).....	DIS	Ranger.....	RANG
Administrator	ADM	Dispatcher Manager.....	DISM	Ranger Manager	RNGM
Agent.....	AGNT	Dispatcher Supervisor.....	DISS	Ranger Supervisor	RNGS
Assistant Chief	ACHF	District Attorney	DA	Records Supervisor.....	RECS
Assistant Commissioner.....	ACOM	Division Chief	DVC	Records Supervisor/Dispatcher.....	RS/D
Assistant Marshal	AMAR	Inspector.....	INS	<i>(Full-time Records Supervisor AND</i>	
Assistant Sheriff	ASH	Investigator (I, II, III)	INV	<i>full-time Dispatcher)</i>	
Bureau Chief	BURC	Investigator Manager.....	INVM	Reserve Level I	RI
Captain.....	CAPT	Investigator Supervisor.....	INVS	<i>(Peace officer authority for duration of</i>	
Chief.....	CHF	Investigator, Welfare Fraud	WINV	<i>assignment only)</i>	
Chief Deputy.....	CDEP	Investigator Manager, Welfare		Reserve Level I (24 hours).....	RI24
Chief Investigator	CHFI	Fraud.....	WINM	<i>(Peace officer authority 24 hours a day)</i>	
Commander.....	CMDR	Investigator Supervisor, Welfare		Reserve Level II	RII
Commissioner	COM	Fraud.....	WINS	Reserve Level III	RIII
Coroner	COR	Jail Assistant Sheriff	JASH	Sergeant.....	SGT
Corporal.....	CPL	Jail Commander	JCMR	Sergeant-at-Arms.....	SGTA
Deputy (I, II, III).....	DPTY	Jail Captain.....	JCAP	Sergeant-at-Arms Chief.....	SGTC
Deputy Chief.....	DCHF	Jail Deputy.....	JDEP	Sheriff.....	SH
Deputy Commissioner.....	DCOM	Jail Lieutenant	JLT	Sheriff/Coroner	SHC
Deputy Coroner	DCOR	Jail Senior Deputy	JSDP	Special Agent	SA
Deputy Coroner Supervisor.....	DCRS	Jail Sergeant	JSGT	Supervisor	SUP
Deputy Coroner Manager.....	DCRM	Lieutenant.....	LT	Supreme Court Bailiff	SCB
Deputy Marshal (I, II, III).....	DMA	Manager	MGR	Trainee	TRN
Detective (I, II, III).....	DET	Marshal.....	MAR	Undersheriff.....	US
Director.....	DIR	Police Officer (I, II, III).....	PO	Warden.....	WARD

SECTION 2: TERMINATION / SEPARATION

Use these instructions to assist you in identifying the reasons for separation in this section of the form

- Box 11.** The type of separation shall be marked, regardless of whether the separation was in good standing or pending a complaint, charge, or investigation for serious misconduct.
- Box 12.** Indicate whether the separation was part of a resolution or settlement as well as the type of resolution or settlement.
- Box 13.** If the reason for separation is related to serious misconduct, indicate all applicable categories of serious misconduct.
- Box 14.** If the reason for separation is not related to serious misconduct as defined in Commission Regulation 1205, enter the reason for separation here (i.e.: The officer resigned to relocate, the officer was separated due to lack of fitness for duty, the officer retired after 25 years of service).

SECTION 3: NOTICE TO SEPARATING OFFICER

Use these instructions to assist you in identifying the reasons for separation in this section of the form

- Box 15.** The separating peace officer shall be provided with a copy of this form and advised of their right to respond to POST if the facts and reasons for separation as they understand them are different than the reasons indicated by the agency. Indicate the way the separating peace officer was provided with a copy of this form and advised of their right to respond. Include the name of the person providing the notice (or responsible for mailing) and the date the notice was given (or sent). If the separating peace officer was provided a copy in person, they shall sign the acknowledgement of personal service and the date of service.

If service was by mail, certified mail, or other courier service, the receipt (proof of mailing) shall be affixed in the space provided.

Should the separating peace officer choose to respond, the response shall be submitted to the Certification Bureau of POST. Electronic copies shall be submitted via email to Certificates@post.ca.gov. Hard copies shall be submitted to the address listed at the top of this form.

SECTION 4: AGENCY HEAD OR THEIR DESIGNEE

Use these instructions to assist you in identifying the reasons for separation in this section of the form

- Box 16.** This form shall be signed by the agency head or authorized designee under penalty of perjury. A certified digital signature is accepted in lieu of a wet signature.