



Commonwealth of Virginia  
Virginia Department of Criminal Justice Services

## Employment Update (Form 31)

Submit to: Department of Criminal Justice Service, 1100 Bank Street, 12<sup>th</sup> Floor, Richmond, VA 23219 to be entered into the T-REX Training Records System within 10 days of change of status

<b>Officer's Current Name: (Last, First, Middle Initial)</b>		<b>Social Security Number:</b>
<b>Agency/Department:</b>		
<b>Rank or Status Changed to:</b>	<b>Date of Rank or Status (mm/dd/year):</b>	<b>Name Change: (Provide former Last, First and Middle Name)</b>
<b>Change Primary Function to:</b> <input type="checkbox"/> Law Enforcement Officer <input type="checkbox"/> Jail Officer/Inmate Security <input type="checkbox"/> Court Security/Civil Process Officer <input type="checkbox"/> Dispatch/Communications Officer <input type="checkbox"/> DOC Corrections Officer <input type="checkbox"/> DOC Non-Custodial Officer <input type="checkbox"/> Instructor Only <b>Date of Function Change: mm/dd/year: _____</b>		
<b>For Secondary Functions: Please list any changes in secondary functions for which you will require training and certification and include start dates:</b> <input type="checkbox"/> Law Enforcement Officer :(mm/dd/year) _____ <input type="checkbox"/> Dispatch/Communications Officer :(mm/dd/year) _____ <input type="checkbox"/> Jail Officer/Inmate Security:(mm/dd/year) _____ <input type="checkbox"/> Court Security/Civil Process Officer :(mm/dd/year) _____		
<b>Termination: Employment with the above Agency/Department has been terminated for the following reason: (include date of change mm/dd/year)</b> Resigned:(mm/dd/year) _____ Retired :(mm/dd/year) _____ Terminated for Cause :(mm/dd/year) _____ Deceased :(mm/dd/year) _____ Other:(Specify) _____ (mm/dd/year) _____		
<b>Attest: I CERTIFY that the above statements are true and correct to the best of my knowledge and that I am authorized to submit this information. (Print or type and Sign form.)</b>		
Submitted by:	Title: _____	Date: _____
Signature:	Telephone :	

Retain a signed copy for your records as a copy may be requested by the Department of Criminal Justice Services if errors are found.