

## OATH OF OFFICE SPECIAL DEPUTATION

(For Special Deputation of Contract Court Security Officers and/or Special Security Officers ONLY)

(Select District)



"I, [Name] , do solemnly swear (or affirm) that I will faithfully execute all lawful precepts directed to the United States Marshal under the authority of the United States, make true returns, take only lawful fees, and in all things well and truly, and without malice or partiality, perform the duties of the Office of Special Deputy United States Marshal during my continuance in office. So help me God.

I fully understand that the purpose of this Special Deputation is to enable me to enforce federal law while in the performance of assigned duties under government contract, and shall authorize me to transport government equipment and assigned weapons to and from temporary duty stations in such manner and at such times specifically authorized by the United States Marshal.

I further understand that this Special Deputation will remain in effect until deemed otherwise by the U.S. Marshal and will be void immediately should my employment with the contractor be terminated for any reason.

(Signature)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ , \_\_\_\_\_  
at \_\_\_\_\_ , \_\_\_\_\_  
(City) (State)

(Signature of officer administering oath)

(Title)

### SEE NEXT PAGE FOR TERMS OF SPECIAL DEPUTATION AND INSTRUCTIONS

\*RESTRICTIONS: This Special Deputation is effective only when the contract Court Security Officer and/or Special Security Officer is performing in an official contract capacity at the designated site authorized by the Government.

NOT VALID UNLESS CERTIFIED BELOW BY DIRECTOR OR DEPUTY DIRECTOR OF THE UNITED STATES MARSHALS SERVICE, OR BY A UNITED STATES MARSHAL:

I certify that the above-named individual, having taken the Oath of Office, is authorized to perform the duties of a contract Court Security Officer and/or Special Security Officer under this special deputation on the \_\_\_\_\_ day of \_\_\_\_\_ , \_\_\_\_\_ .

(Signature of officer administering oath)

Prior editions of this form are obsolete and are not to be used.

## **TERMS OF SPECIAL DEPUTATION**

The individual named herein is authorized, under the authority of the Attorney General, to exercise the authority of a Special Deputy United States Marshal in fulfilling the responsibilities of a contract Court Security Officer and/or Special Security Officer under the terms and conditions specified by the United States Marshals Service contract.

This authorization does not constitute appointment or employment by the United States Marshals Service, the United States Department of Justice, or the United States Government. The contract Court Security Officer and/or Special Security Officer agrees to perform the duties required under this Special Deputation with the knowledge that he or she is neither entering into an employment agreement with the Federal Government or any element thereof, nor being appointed to any position in the Federal Service by virtue of this Special Deputation. The contract Court Security Officer and/or Special Security Officer understands and acknowledges that the authorities vested in him or her by this Special Deputation can only be exercised in furtherance of the mission for which he or she has been specifically deputized and extend only so far as may be necessary to faithfully complete that mission. Moreover, those authorities terminate at the expiration of the term of the Special Deputation.

## **INSTRUCTIONS**

The oath of office must be subscribed and sworn to before an officer authorized to administer oaths generally, such as a justice, judge, clerk for a United States court, a United States Magistrate, or a notary public or other state or local official authorized to administer oaths, or before an officer or employee of the Department of Justice who has been designated in writing by the Attorney General, the Deputy Attorney General, or the Assistant Attorney General for administering the oath of office required by Section 1757 of the Revised Statutes, as amended (5 U.S.C Section 16), and to administer any other oath required by law in connection with employment in the executive branch of the Federal Government (although the oath itself does not constitute employment, appointment, or related commitment on the part of the Federal Government.) The Director, United States Marshals Service, pursuant to 28 C.F.R. 0.151, hereby designates the United States Marshal as such an official.

SPONSORING FEDERAL AGENCY

* 1. Sponsoring Federal Agency:		* 2. Applicant's District/Division/Task Force (Swearing in Location):	
* 3. Point of Contact:	* 4. Work E-mail Address:		* 5. Phone Number:
* 6. District Address - Street:		* 7. City:	* 8. State: * 9. ZIP Code:

AGENCY/DEPARTMENT BEING SPONSORED

* 10. Agency/Department Being Sponsored:		* 11. Agency/Department Point of Contact:	* 12. Work E-mail Address:
* 13. Phone Number:	* 14. Agency/Department Address - Street:	* 15. City:	* 16. State: * 17. ZIP Code:

LIMIT OF SPECIAL DEPUTATION AUTHORITY

\* 18. Name of Task Force, Operation, or Mission:

This Deputation is valid from \_\_\_\_\_ to \_\_\_\_\_  
(MM/DD/YYYY)(MM/DD/YYYY)

NOTE: Special Deputations cannot be back-dated and are not retroactive. Special Deputations will be valid from the date the applicant(s) are sworn-in to the expiration date indicated on Page 1, Question 18 of this form.

\* 19. Total number of group special deputation applicants:

\* 20. I have reviewed the attached form submitted by the applicants for Special Deputation and verify that the information submitted by them is true and accurate.

Printed Name: \_\_\_\_\_

NOTE: Do not sign until after all group applicants have signed.

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

Sponsor, U.S. Marshal, Chief Deputy, or Designee (Must be electronically signed or digitally signed with certificate)

SDP Staff Only: ☐ Approval ☐ Disapproval ☐ Application Incomplete ☐ Other

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

Assistant Chief Inspector, Special Deputation Program or Designee

## Application for Group Special Deputation (continued)

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21. Agency/Department Being Sponsored (From Page 1):

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22. Applicant's District/Division/Task Force (Swearing in Location) (From Page 1):

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23. I certify that the following statements are true and accurate. (False or fraudulent information knowingly provided on this form is criminally punishable pursuant to federal law, including Title 18 U.S.C. Section 1001.)

- I am a citizen of the United States (includes naturalized citizens).
- I am employed with a federal, state, or local law enforcement agency.
- I have successfully completed the basic law enforcement training program approved by my employer.
- I have at least one year previous law enforcement experience to include general arrest authority.
- I have not been convicted of a crime of domestic violence as defined in Title 18 U.S.C., Section 922 (g)(9) Lautenberg Amendment
- I have qualified with my primary authorized firearm within the past 6 months.
- I understand I am not authorized to participate in federal drug investigations unless authorized by DEA or FBI.
- I have read and agree to comply with the deadly force and use of less than lethal device policies of either my agency or the U.S. Department of Justice.
- I have included a copy of my employer's authorization letter stating that they concur with my participation and that I have no internal investigations pending within my organization. In addition, I promptly shall inform the USMS if the following occur during the period of deputation: I am subject to criminal investigation or criminal charges through arrest, information, or indictment; or my serious misconduct (unlawful violence, improper profiling, bias, or deprivation of civil rights) becomes the basis of a settlement, judgment, sustained complaint, or finding of unlawful violence, improper profiling, bias, or deprivation of civil rights; or my conduct is the subject of a misconduct investigation that is likely to lead to discipline that would result in my suspension or removal from employment. (Exception: ESF-13)
- I understand that Special Deputy United States Marshals are prohibited from conducting electronic surveillance in USMS and USMS-adopted investigations without the written approval of the USMS Investigative Operations Division, Technical Operations Group.
- I understand that SpDUSM, acting under the authority of their federal deputation, may only conduct electronic surveillance in non-USMS investigations in strict adherence to federal and state law, and United States Department of Justice policy, and only with the explicit approval and under the supervision, control and scope of authority of the non-USMS sponsoring agency, whose responsibility it is to ensure that all ELSUR conducted by its sponsored SpDUSM personnel is conducted lawfully and consistent with United States Department of Justice policy. SpDUSM may not conduct electronic surveillance pursuant to their SpDUSM authority on non-sponsoring agency cases. Violation of these proscriptions will result in this special deputation being revoked.

### Application for Group Special Deputation (continued)

[illegible]

**Application for Group Special Deputation (continued)**[illegible]



**Application for Group Special Deputation (continued)**[illegible]

**Application for Group Special Deputation (continued)**[illegible]



Application for Group Special Deputation (continued)

23a. First Name MI Last Name (do not include punctuation)	23b. SSN (Last 4 digits)	23c. DOB (MM/DD/YYYY)	23d. Firearms Qualification Date (MM/DD/YYYY)	23e. Firearm Make	23f. Firearm Model	23g. Firearm Caliber	23h. Signature

**CLICK HERE** to submit form to [svc-iaews-prod@usdoj.gov](mailto:svc-iaews-prod@usdoj.gov) (Attach any supporting documentation)

\* = Required Field

## INSTRUCTIONS TO COMPLETE THIS FORM

1. All Group Special Deputation Applications must be accompanied by a copy of the signed authorization letter (on official letterhead) from the applicants' employer. The letter must indicate that the employer concurs with their employees' participation and that the applicants have no pending internal investigations with the organization.
2. Complete all fields. Scanned copies of this form will not be accepted. Only electronically fillable forms will be accepted unless otherwise instructed by SDP. If the form must be scanned before being submitted, scan ALL pages (1-8). Submissions that are missing pages cannot be processed by USMS.
3. If the signatures cannot be electronic on the USM-3C, please attach the scanned applicant table (pages 3-8) with handwritten signatures as a second attachment. Must include ALL pages 3-8.
4. Any changes that you make to this form after you sign it must be initialed and dated by you. Under certain limited circumstances, USMS may modify the form consistent with your intent.
5. You must use U.S. Postal Service 2-letter state abbreviations when you fill out this form. Do not abbreviate the names of cities or foreign countries.
6. All telephone numbers must include area codes.
7. If you need additional space to add more employees, please submit another Form USM-3C.
8. Special Deputations cannot be back-dated or retroactive. Special Deputations will be valid from the date the applicant(s) are sworn-in to the expiration date indicated on Page 1, Question 18 of this form.
9. All answers on pages 3-7, numbers 23a-23g, must be electronically typed. Handwritten answers cannot be processed and will be subject to rejection.

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### **Privacy Act Statement**

The authority for collection of the information on this form is 28 CFR subpart T, 0.112, 28 U.S.C. 561 through 569. The USMS is authorized to deputize selected persons to perform the functions of a Deputy U.S. Marshal whenever the law enforcement needs of the USMS so require, to provide courtroom security for the Federal judiciary, and as designated by the Associate Attorney General pursuant to 28 CFR 0.19(a)(3). This form serves as a record of the special deputations granted by the USMS to assist in tracking, controlling and monitoring the Special Deputation Program. Your Social Security number is requested as an additional identifier pursuant to Executive Order 9397. Disclosure of the information on this form is voluntary, however, failure to provide the information may result in your disqualification for special deputation.

This form may be routinely disclosed: To a federal, state or local law enforcement agency regarding that agency's USMS deputized employees; Where a record, either alone or in conjunction with other information, indicates a violation or potential violation of law - criminal, civil, or regulatory in nature - the relevant records may be referred to the appropriate federal, state, local, territorial, tribal, or foreign law enforcement authority or other appropriate entity charged with the responsibility for investigating or prosecuting such violation or charged with enforcing or implementing such law; and as otherwise provided in USMS Privacy Act system of records notice Justice/USM-004, Special Deputation Files, 72 FR 33515 (June 18, 2007).

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing this burden, to U.S. Marshals Service, Operations Support Division, Attn: Special Deputations Unit, Washington, DC 20530-0001.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.