



LOUISIANA STATE BOARD OF PRIVATE INVESTIGATOR EXAMINERS
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CHANGE EMPLOYER FORM

DATE: _____

NAME OF INVESTIGATOR: _____

TO CHANGE: _____ **EMPLOYER FOR INDIVIDUAL**

_____ **EMPLOYER FOR APPRENTICE**

Please complete & return the items checked below:

	Complete items 1-5 of the first page of the Personal Information/Application.
	Complete a Notice of Change/Re-Employed Form .
	Complete and sign a Sponsor Form .
	If not already on file with the LSBPIE office, enclose one 5x7 color photograph . Should be in clear focus, well lighted, with a white background and show head and shoulders only. No digital camera images or passport enlargements will be accepted.
	\$50.00 transfer fee for each investigator . Send check(s) or money order(s) payable to "LSBPIE" and write investigator name and license number on each check or money order.