TEXAS COMMISSION ON LAW ENFORCEMENT

6330 E HIGHWAY 290 STE 200, AUSTIN, Texas 78723-1035

Phone: (512) 936-7700

http://www.tcole.texas.gov/

SEPARATION OF LICENSEE (F-5)

LICENSEE INFORMATION (Occupations Code 1701.452)

Non-refundable \$35 fee for paper form. Money order, agency or cashier's check. (5541)

1. TCOLE PID	2. Last Nar	ne	-	3. F	First Name			4. M. I.	5. Suffix (Jr., etc.)
206883	FRAZIER			FREDERICK			E		
6. Date of Birth	7. Hom		manent Mailing Addre	ess	TR	EDERIC	8. City	L	
								McKinney	,
9. State 10	D. Zip Code	1	11. Phone Number		12. Email			Wickining	!
13. APPOINTMEN	т								
X Peace Offi	cer _	County	/Contract Jailer	Tele	communicator		Medic	al Corporation	P.O.
	Public	Security	Officer		Reserv	e Officer	· (licensed rese	rve or condition	nal only)
14. TCOLE Agend	y Number	15. Ap	pointing Agency						
113208	3			D	ALLAS POLIC	E DEP	ARTMENT		
16. DESIGNATIO Report must I (1) resigns, re	N OF SEPA pe submitted etires, or sep all administra	l not late parates fr ative app	: (Check only one). r than the seventh but om the agency: or peals available to the l 201.452.	siness day	after the date t	the licens	se holder:	d based on an	allegation of
17. Date Appointe	d:	12/8/1	995	18. Date	of Separation:		12/9/2023		
☐ Honorably D	ischarged								
			from employment with final disciplinary action					agency while in	good standing
☐ General Disc	_								
to a discipl (B) was te	linary invest minated by	igation of or retired	or resigned from, or di f conduct that is not in d or resigned from a la of a reduction in work	ncluded in to aw enforce	the definition of ment agency a	dishonond the se	rably discharge eparation was f	ed; or	
X Dishonorably	y Discharg	jed							
criminal mi	sconduct; o minated by	r	forcement agency or forcement agency or						
If this is your second	d dishonoral	ble disch	nplete and submit to a arge on an F-5 Repor discharge with a petiti	rcole a " rt, your lice	ense will be sus	pended	upon TCOLE's	receipt of this	document. Failure
19. I, chief administ	trator or des	Ignees, at	ttest that this is a true	and accura	te explanation o	of the circ	cumstances und	ler which this p	erson resigned or
	s provided t	o the per	son as required by Occ	cupations (Code 1701.452, i	n 7 busir	ess days by:		
Han	d delivery on				X Certified mai	il on	12/19/202	3	
_	-		Date				Date		
William Griffith					1			12/13/2	\sim
Agency Administrator of Submitted by: PHAYE		Type or P	Print)	s	ignature			Date	

Redaction Date: 1/23/2024 9:05:40 AM

Redaction Log

Total Number of Redactions in Document: 5

Redaction Reasons by Page

Page	Reason	Description	Occurrences
1			5

Redaction Date: 1/23/2024 9:05:40 AM

Redaction Log

Redaction Reasons by Exemption

Reason	Description	Pages (Count)
		1(5)