## TEXAS COMMISSION ON LAW ENFORCEMENT 6330 E. Highway 290, STE. 200 Austin, Texas 78723-1035 Phone: (512) 936-7700 http://www.tcole.texas.gov

## FIREARMS INSTRUCTOR PROFICIENCY CERTIFICATE APPLICATION Commission Rules §221.1 & 221.19 Non-refundable \$35 fee must be included. <u>Money order, agency or cashier's check</u>. (5107)

## APPLICANT INFORMATION

1. TCOLE PID	2. Last Name		3. First Name		4. M.I.	5. Suffix (Jr., etc.)
6. Date of Birth	7. Home Mailing Address		8. City		9. State	10. Zip Code
11. Phone Number (inclue	de area code)	12. Date Course 2222 Comple (or Approved Course):	ted	13. Training Provider		

## **CURRENT DEPARTMENT INFORMATION**

14. TCOLE Agency Number	15. Appoin	ting Agency		16. Agency Ma	iling Address
17. City		18. County	19	. Zip Code	20. Phone Number

Applicants NOT currently licensed or certified by the commission must submit documents proving that they have met the following requirements.

221.19 To qualify for a firearms instructor proficiency certificate, an applicant must meet all proficiency requirements including:

(1) at least three years' experience as a licensee or a firearms instructor;

(2) current instructor license or certificate issued by the commission; and

(3) successful completion of the commission's firearms instructor course, or a firearms instructor course that meets or exceeds the minimum standards established and approved by the commission.

Equivalents: 2228 IALEFI Firearms Instructor Course, NRA Handgun/Shotgun Police Instructor, NRA Pistol/Shotgun Police Instructor, FBI Firearms Instructor, or FLETC Firearms Instructor Training Program (10 day

course) U.S. DOE Firearms Instructor Course

I, the applicant, attest that I meet the requirements for issuance of the Firearms Instructor Proficiency Certificate 221.19, including Proficiency Certificate Requirement 221.1(b), and have included the \$35 fee.

I, the applicant, am fully aware that this application is a government document and, under penalties of perjury, I declare the foregoing information to be true and correct.

INITIAL APPLICATION

Signature of Applicant

Date

DUPLICATE CERTIFICATE