

**TEXAS COMMISSION ON LAW ENFORCEMENT**

6330 E. Highway 290, STE. 200

Austin, Texas 78723-1035

Phone: (512) 936-7700

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

**Retired Federal or Out-of-State Officer Firearms Certificate  
Texas Occupations Code §1701.357**

**Non-refundable \$35 fee must be included. Money order or cashier's check only. (5117)**

**Submit PID Assignment form if TCOLE PID has not been issued. Call (512) 936-7700 if questions.**

**APPLICANT INFORMATION**

1. TCOLE PID	2. Last Name	3. First Name	4. M.I.	5. Suffix (Jr., etc.)
6. Date of Birth	7. Home or Permanent Mailing Address	8. City:	9. State	
10. Zip Code	11. Phone Number (include area code)	12. Email		

**Applicants must be a qualified retired law enforcement officer, residing in Texas, who are entitled to carry a concealed firearm under 18 U.S.C. Section 926C.**

**Check all that apply**

- Retired Federal Officer (as designated in 1701.357 of the Texas Occupations Code)
- Retired Out-of-State Officer
  - Initial Application (Firearms Proficiency expires 12 months from qualification month)
  - Renewal / duplicate Application (Photo on file will be used. Attach current certificate of firearms proficiency)

**NOTE:** Application for renewal should be made 45 days prior to renewal. Current cards expiration date\_\_\_\_\_.

To qualify, an applicant for a Retired Federal/Out-of-State Peace Officer Firearms Proficiency Certificate must meet all proficiency requirements including submission of:

- (1) Certified or notarized copy of retired credentials as:
  - (a) a peace officer from another state of the United States;
  - (b) a federal criminal investigator designated as a special investigator under Article 2.122, CCP; or
  - (c) a qualified retired law enforcement officer who is entitled to carry a concealed firearm under 18 U.S.C. Section 926C and is not otherwise described by Subdivision (1) or (2).
- (2) A sworn affidavit stating:
  - (a) the officer honorably retired after not less than a total of 15 years of service as a commissioned officer with one or more state or local law enforcement agencies;
  - (b) the officer's license as a commissioned officer was not revoked or suspended for any period during the officer's term of service as a commissioned officer;
  - (c) retired from service with such agency, after completing any applicable probationary period of such service, due to a service-connected disability, as determined by such agency; and
  - (d) the officer has no psychological or physical disability that would interfere with the officer's proper handling of a handgun;
  - (e) before completing 15 years of service as a commissioned officer with one or more state or local law enforcement agencies, separated from employment with the agency or agencies and is a qualified retired law enforcement officer, as defined by 18 U.S.C. Section 926C;
- (3) A color passport photo with applicant's signature on back; and
- (4) Meet the firearms proficiency requirements for handgun as established in Commission Rule §218.9(c)(1).

I, the applicant, attest that I meet the requirements for issuance of a Retired Federal/Out-of-State Officer Firearms Proficiency (1701.357 OC) and have included the non-refundable \$35 fee .

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

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



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**PID ASSIGNMENT (C-1)**

**Completion of all fields required. Mail or fax form (512) 936-7766.**

**INDIVIDUAL INFORMATION**

1. Social Security Number	2. First Name	3. M.I.	4. Last Name	5. Suffix (Jr., etc.)
6. Race / Ethnicity <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Multicultural <input type="checkbox"/> White		7. Date of Birth	8. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	9. Driver's License State: Num.:
10. Home Mailing Address		11. City		12. State
14. Height		15. Weight	16. Hair Color	17. Eye Color
18. U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	19. Phone Number (include area code)		20. Email	

This form is to be submitted only for the express purpose of having a personal identification number (PID) assigned by TCOLE to the above named individual therein creating a TCOLE record and allowing training to be reported for that individual.

**Agency administrator or training coordinator check appropriate box for their student or employee.**

- Applying for entry into a basic licensing course.
- Applicant has read and received a copy of §217.23 Basic Licensing Enrollment Standards

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

- Future appointment as a Telecommunicator, Temporary or Licensed
- Future appointment as a County or Contract Jailer, Temporary or Licensed
- Future Appointment as a Probation Officer, Juvenile or Adult
- Ability to track training hours

TCOLE agency / training provider number \_\_\_\_\_ and Name \_\_\_\_\_

\_\_\_\_\_  
Agency Administrator or Training Coordinator (Type or Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Individuals not associated with a training provider or agency check below.**

- Applying for instructors certificate
- Applying for Retired Federal Firearms ID
- Applying for consideration of prior out-of-state, federal, military, or TDCJ training.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date