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.

Money order, agency or cashier's check. (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 (include area code)	12. Date Course 2222 Completed (or Approved Course):	13. Training Provider

CURRENT DEPARTMENT INFORMATION

14. TCOLE Agency Number	15. Appointing Agency	16. Agency Mailing 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

_____ _____ _____DUPLICATE CERTIFICATE
Signature of Applicant Date