



ARKANSAS STATE POLICE

Concealed Handgun Carry License New or Renewal Application Certification of Training

NOTICE: Knowingly providing false information on this form could result in criminal prosecution or revocation or non-issuance of an Arkansas concealed handgun carry license.

The applicant by completing this form, swears or affirms that he/she have successfully completed the required training for an Arkansas concealed handgun carry license as required by Arkansas Code Annotated §§5-73-301 et seq. and the Arkansas State Police Concealed Handgun Carry License Rules.

The instructor(s) by completing this form, swears or affirms that he/she have successfully administered the required training for an Arkansas concealed handgun carry license as required by Arkansas Code Annotated §§5-73-301 et seq. and the Arkansas State Police Concealed Handgun Carry License Rules.

I hereby state under oath that the representations made herein are true and correct

Completion Date of Training: _____

Qualified with Semiautomatic _____ Revolver _____

On-line Authorization # _____ CHCL # _____
(if applicable) (if renewal)

Name of the Applicant: _____
(First/MI/Last Name)

Signature of Applicant: _____ Date: _____
(First/MI/Last Name) (Month/Day/Year)

Name of Instructor: _____ ASP # _____
(First/MI/Last Name)

Signature of Instructor: _____ Date: _____
(First/MI/Last Name) (Month/Day/Year)

INSTRUCTORS ONLY: Instructors who apply for new or renewal of their Arkansas concealed handgun carry license can, in lieu of a training certificate, send in a copy of their firearm safety training instructor registration certificate issued by the Department.

Effective January 1, 2009