

New Mexico Department of Public Safety

CONCEALED HANDGUN LICENSE/ FIREARMS SAFETY TRAINING INSTRUCTOR APPROVAL APPLICATION

Read "APPLICATION INSTRUCTIONS" prior to completing this application. TYPE or PRINT LEGIBLY IN INK. Your application WILL NOT be processed unless/until all applicable questions have been answered on page 2 and all required documents have been submitted.

Be sure to include: two (2) full sets of fingerprints, two (2) release forms, an original **(NOT A PHOTOCOPY)** of your birth certificate, a current training certificate, a photocopy of New Mexico Driver's License or Identification Card and payment in the form of a personal check, cashier's check or money order for the appropriate amount.

CASH WILL NOT BE ACCEPTED. FEES ARE NON-REFUNDABLE.

<input type="checkbox"/> New License Application		<input type="checkbox"/> Training Instructor Application		<input type="checkbox"/> Renewal Application	
<input type="checkbox"/> Current Law Enforcement		<input type="checkbox"/> Retired Law Enforcement			
<input type="checkbox"/> Other _____					
Social Security Number:		Date of Birth (mm-dd-yyyy)		Sex: M <input type="checkbox"/> F <input type="checkbox"/>	
Last Name:		First Name:		Middle Name:	
County of Residence:	NM Driver's License or ID Number:	NM Driver's License or ID Issue Date:	Height:	Weight:	Eye Color:
Place of Birth:		City of Birth:		State of Birth:	
				Country of Birth other than USA:	
Mailing Address:			City:		State: Zip Code:
Physical Address: (if different than above)			City:		State: Zip Code:
How long have you lived at the above address?		Home Phone:		Business Phone:	
Years	Months				
FOR OFFICE USE ONLY:					
Form of Payment: <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CASHIER'S CHECK <input type="checkbox"/> PERSONAL CHECK					

The Department of Public Safety acknowledges that on _____, the sum of \$ _____ was received by:					
_____			_____		
Signature of employee accepting application			Printed/Typed name of employee accepting application		
Instructions to Department Employee or approved person receiving the application: Use the check list below to mark off the required documents included in this packet prior to forwarding packet to the Concealed Carry Unit.					
<input type="checkbox"/> 2-page Application	<input type="checkbox"/> Photocopy of NM DL or ID	<input type="checkbox"/> (2) Release Forms	<input type="checkbox"/> Letter from Agency		
<input type="checkbox"/> \$100.00 Application Fee	<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Fingerprint Cards (2) complete/signed			
<input type="checkbox"/> \$75.00 Renewal Fee	<input type="checkbox"/> Training Certificate	<input type="checkbox"/> Law Enforcement Certification Number			

ALL APPLICANTS CHECK "YES" or "NO" TO THE QUESTIONS BELOW

YES NO

1. Are you a citizen of the United States?		
2. Are you a resident of New Mexico or a member of the armed forces whose permanent duty station is located in New Mexico or a dependent of such a member?		
3. Are you 21 years of age or older?		
4. Have you satisfactorily completed a DPS –Approved Firearms Safety Training Program or Renewal Training Program?		
5. Have you been convicted of a felony in New Mexico or any other state or pursuant to the laws of the United States or any other jurisdiction?		
6. Are you currently under indictment for a felony criminal offense in New Mexico or any other state or pursuant to the laws of the United States or any other jurisdiction?		
7. Are you otherwise prohibited by federal law or the law of any other jurisdiction from purchasing or possessing a firearm?		
8. Have you been adjudicated incompetent or committed to a mental institution?		
9. Are you an unlawful user of, or addicted to any controlled substances and/or alcohol?		
10. Have you received a conditional discharge, a diversion or a deferment, or been convicted of, pled guilty to or entered a plea of nolo contendere to a misdemeanor offense involving a crime of violence within the last 10 years?		
11. Have you, within five years immediately preceding this application, been convicted of a misdemeanor offense involving driving while under the influence of intoxicating liquor or drugs?		
12. Have you been convicted of a misdemeanor offense involving the possession or abuse of a controlled substance within the last 10 years immediately preceding this application?		
13. Have you been convicted of a misdemeanor offense involving assault, battery or battery against a household member?		
14. Since the age of 18, have you been arrested for any reason?		
15. Are you a fugitive from justice?		
16. Are you an alien who is residing in the United States illegally or a former citizen of the United States who has renounced citizenship?		
17. ***INSTRUCTOR APPLICANTS ONLY*** Do you meet ALL training instructor criteria required under NMAC 10.8.2.22? (If yes, include all proper documentation).		

WARNING: Submission of a false answer to any question or submission of a materially false document will result in the denial of the application and may result in criminal prosecution for perjury (NMSA 30-25-1). Tampering with public records may result in criminal prosecution under NMSA 30-26-1.

I HEREBY STATE UNDER PENALTY OF LAW THAT:

1. I have read the New Mexico Concealed Handgun Carry Act of 2003 and qualify to apply for a concealed handgun license;
2. I have been furnished with a copy of the state laws relating to concealed handguns and have read and understand them;
3. I want a permit to carry a concealed handgun for lawful purposes, which may include self-defense;
4. The information in this application and any documents submitted in this application is true, correct and complete to the best of my knowledge and belief; and
5. I understand a license eligibility investigation will be conducted as a part of the application process; this may involve, but is not limited to, computerized record searches/criminal history searches and I authorize the investigation.

_____ Date

_____ Signature of Applicant

_____ Applicant Full Name (Print Clearly or Type)