



**CERTIFIED INSTRUCTOR APPLICATION**  
**Kansas Personal and Family Protection Act**  
 (Revised 06-09)



**Instructions for Application**

Please complete this 6-page application fully by typing or printing in **blue or black ink** all requested information. You must attach the following items:

1. Non-refundable \$100.00 application fee. Money order or cashier’s check payable to the “Office of Attorney General.”
2. A photocopy of all certificates referenced in Section III. NRA or AACFI certified instructors must attach a copy of their current credential bearing the expiration date. Current service law enforcement officers (certified by KLETC) must attach a copy of their current agency credentials. Applicants relying on non-expiring firearms instructor certifications must attach a copy of those certificates.
3. A 2” x 2” passport-type color photograph of the applicant taken within the preceding 30 days with no sunglasses or hat. Photo must be a frontal view containing head and shoulders. Attach photo to page 2 of the application.

The completed application, fee, photo and other attachments must be mailed directly to the **Concealed Carry Unit, Office of Attorney General, 720 SW Jackson, Suite 204, Topeka, KS 66603**

**NOTE: In Section II, should you answer “no” to question 1 or 2, or “yes” to any of the questions numbered 3 through 15, explain you answer fully on a separate sheet of paper and attach to your completed application.**

**READ CAREFULLY BEFORE CONTINUING:** Individuals with adult criminal histories which include expunged felony offenses **may** now be eligible for licensure. **Even if expunged**, the AG has access to all adult records; expunged juvenile adjudications are not disqualifying offenses. **Even if expunged**, all criminal histories inquired about in Section II **must be disclosed** by applicants. **Even if expunged**, any conviction for a “person felony” (or an offense under the Controlled Substances Act), where the applicant was found in possession of a firearm at the time of the offense, will still result in denial as that applicant is not allowed to possess firearms under KSA 21-4204.

If an instructor applicant’s criminal history includes a felony level **conviction or diversion**, in order to be eligible for licensure: (a) the felony **must** be expunged from the individual’s record; **and** (b) 5 years must have elapsed between the date the individual became **eligible for expungement** and the date the instructor application is submitted. If an applicant’s criminal history includes an expunged misdemeanor **conviction or diversion** for one or more of the offenses found under question 6 in Section II, the applicant can only apply if 5 years have elapsed since the date of **conviction or placement on diversion** and they are otherwise eligible. Applications which do not meet these criteria **prior to application** will be denied. To ensure your eligibility, consult private legal counsel – the AG **cannot** provide counsel.

If approved, you will be issued a certificate bearing the Attorney General’s signature.

**ALL FEES SUBMITTED ARE NONREFUNDABLE.**

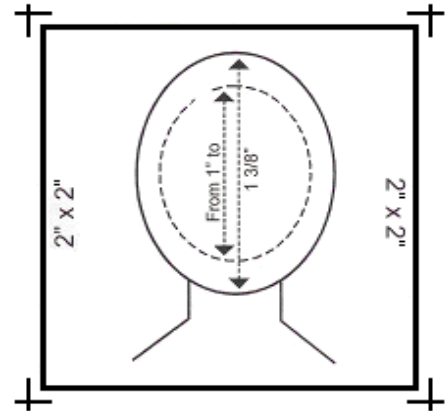
Signature \_\_\_\_\_

Date \_\_\_\_\_

Official Use – Attorney General

**WARNING:** This application is executed under oath. A false statement on this application, or submission of a false document, may subject the applicant to prosecution for the crime of perjury, K.S.A. 21-3805, and amendments thereto, a severity level nine (9) non-person felony, or other applicable criminal charges.

When completing this form **Print in Blue or Black Ink**



**Section I: Application**

NAME: Last	First:	Middle:	Jr., Sr., etc.	
Aliases/Maiden Name/Other names used:	Place of Birth: (City, State, Country)(If born outside of the U.S., attach a copy of birth certificate, certificate of naturalization or U.S. passport)			
Current Address:	City:	State:	County:	Zip code:
Previous Address within last 5 years: From: _____, 20__ to _____, 20__	City:	State:	County:	Zip code:
Date of Birth:	Occupation:			
Drivers License or Identification Card #:	Social Security Number:*			
Telephone number:**	Email:**			

\* Providing your SSN is voluntary in order to verify your identity and confirm your eligibility for a CCH license (75-7c05). Failure to provide it may delay processing of your application. Pursuant to KSA 39-758 and 74-139, and amendments thereto, your SSN may be disclosed to the Director of Taxation and/or the Kansas Department of Social and Rehabilitation Services (SRS) for child support enforcement purposes.  
 \*\* Providing your telephone and/or email address is optional as well.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

<b>Section II: Qualifying Information:</b> Place a check mark under the appropriate 'yes' or 'no' answer to the following questions numbered 1 through 14. Answer all applicable questions.	<b>Yes</b>	<b>No</b>
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**Answering 'no' to any question numbered 1 and 2 could result in denial of certification.**

1. Are you twenty-one (21) years of age or older at the time of application?		
2. Are you a citizen of the United States?		

**Answering 'yes' to any question numbered 3 through 15 could result in denial of certification.**

3. Do you have any physical infirmities or disabilities which prevent you from safely handling a firearm?		
4. <b>Even if expunged</b> , have you ever been <b>convicted or placed on diversion</b> , in Kansas or any other jurisdiction, for an act that constitutes a felony in Kansas? <b><u>Failure to disclose expunged convictions can result in criminal charges.</u></b> "Felony" means a crime that is defined as a felony by law or is punishable by imprisonment in a state or federal correctional institution. <b>If an applicant has had a felony conviction or diversion expunged, an applicant must wait 5 years from the date they were eligible to expunge that record before they can apply for a CCH.</b>		
5. Have you ever been adjudicated as a juvenile offender, in Kansas or any other jurisdiction, for a an act that would be a felony if committed by an adult?*		
*Expunged juvenile adjudications will not be considered to disqualify an applicant.		
6. <b>Even if expunged, within the last 5 years have you:</b>		
(a) been <b>convicted or placed on diversion</b> , in Kansas or any other jurisdiction, for an act that constitutes a misdemeanor under the provisions of the uniform controlled substances act, currently found at K.S.A. 65-4101 <i>et seq</i> ;		
(b) been <b>convicted or placed on diversion</b> , in Kansas or any other jurisdiction, two (2) or more times for an act that constitutes a violation of K.S.A. 8-1567, driving under the influence of alcohol or controlled substance;		
(c) been <b>convicted or placed on diversion</b> , in Kansas or any other jurisdiction, for an act that constitutes a 'domestic violence misdemeanor.' A 'domestic violence misdemeanor' means: (1) a violation of K.S.A. 21-3412a and amendments thereto; <b>or</b> (2) any other misdemeanor under federal, municipal or state law that has as an element the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by a current or former spouse, parent, or guardian of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse, parent or guardian, or by a person similarly situated to a spouse, parent or guardian of the victim;		
(d) been <b>convicted or placed on diversion</b> , in Kansas or any other jurisdiction, for an act that constitutes a violation of K.S.A. 75-7c12 (carrying a concealed weapon under the influence of alcohol/drugs); or		
(e) been <b>convicted or placed on diversion</b> , in Kansas or any other jurisdiction, for an act that constitutes a violation of K.S.A. 21-4201(a)(4), and amendments thereto, for the unlawful concealed carry of a firearm on one's person?		
7. <b>Within the last 5 years</b> , have you:		
(a) been adjudicated as a juvenile offender, in Kansas or any other jurisdiction, for an unlawful act that would constitute a misdemeanor crime found under questions 8(a) through (e) above if that act had been committed by an adult?		
(b) if answer to question 7(a) is 'yes,' which subsection(s) of question 6 apply?		

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Section II: (cont'd)	Yes	No
8. Have you ever been convicted of a 'misdemeanor crime of domestic violence' as defined by federal law, 18 U.S.C. 922(a)(33)? (for definition, see question 8(c)(2) above)		
9. (A) Have you ever been adjudged a disabled person under the Kansas act for obtaining a guardian or conservator (K.S.A. 59-3050 et seq.); or had a guardian, conservator, or both appointed for you under that Act or similar law from another jurisdiction?  (B) If you answered "yes" to 9(A), have you been restored to capacity for at least three (3) years?		
10. (A) Have you <b>ever</b> been charged with, <b>or are you currently</b> under charges for a crime which, if convicted or placed on diversion for, would render you ineligible for a license?  (B) If so charged, and final disposition has occurred, are there any other charges pending that would cause you to be ineligible for a concealed carry license?		
11. (A) Have you ever been "adjudicated as a mental defective" or "committed to a mental institution" as referenced in K.S.A. 2009 Supp 75-7c04(e); or ordered by a Kansas court to receive treatment for mental or drug or alcohol abuse under K.S.A. 59-2966 or 59-29b66? <b>(Does not include court ordered DUI counseling)</b> (B) If you answered " yes" to question 11(A), do you have a Certificate, issued by the court at least five (5) years prior to the date of application, restoring your ability to possess a firearm?		
12. Are you currently subject to any restraining orders in the following actions: (1) protection from abuse or stalking (KSA 60-3101; 60-31a01); (2) divorce (KSA 60-1607); (3) child-in-need-of-care (KSA 38-2242; 38-2243; 38-2255); or (4) similar orders issued from other jurisdictions?		
13. Have you attempted suicide in the five (5) years prior to the date of application?		
14. Have you been dishonorably discharged from the military?		
15. Are you currently in contempt of court in a child support proceeding?		
Applicant Signature: _____ Date: _____		

Please note that all firearms instructor qualifications indicated in Section III must be current. If your certifications or credentials have expired you must validate and/or restore them to active status before applying. Kansas certified concealed carry instructors must keep their qualifications current in order to maintain certification and continue instructing the required CCHL weapons safety and training course.

Section III. Firearms Instructor Qualifications (Check All That Apply)	Yes	No									
1. Current service Kansas law enforcement officer (Certified by KLETC) Only KLETC certified fulltime or part-time officers are eligible under this qualification. Attach a copy of your law enforcement credentials issued by your employing agency.											
2. Current certification as a firearms trainer for licensed Kansas private investigators (Certified by the Attorney General pursuant to K.S.A. 75-7b21). Attach a copy of your current certification issued by the Attorney General.											
3. Current certification as a firearms instructor with a branch of the United States armed services. Attach a copy of your firearms instructor rating, certificate or a letter from your commanding officer signifying your current assignment as a firearms instructor.											
4. Current certification as a firearms trainer or instructor with one or more of the following Organizations: NRA, AACFI, KLETC, state or federal law enforcement agency. Attach a copy of your current NRA or AACFI credentials bearing an expiration date. Applicants with non-expiring state or federal firearms instructor certifications must attach a copy of those certificates.											
<p>5. If you answered "Yes" to Section III, Questions 3 or 4, list the branch of service and/or organization and type of instructor qualification held.</p> <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%; text-align: center;"><u>Name of Organization</u></th> <th style="width: 40%; text-align: center;"><u>Certification Held</u></th> </tr> </thead> <tbody> <tr> <td>A. _____</td> <td>_____</td> </tr> <tr> <td>B. _____</td> <td>_____</td> </tr> <tr> <td>C. _____</td> <td>_____</td> </tr> <tr> <td>D. _____</td> <td>_____</td> </tr> </tbody> </table>	<u>Name of Organization</u>	<u>Certification Held</u>	A. _____	_____	B. _____	_____	C. _____	_____	D. _____	_____	
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A. _____	_____										
B. _____	_____										
C. _____	_____										
D. _____	_____										

Section IV: Sworn Statement
<p><b>WARNING: This application is executed under oath.</b> A false statement or answer in sections I, II, or III of this application, or submission of a false document, may subject the applicant to prosecution for the crime of perjury, K.S.A. 21-3805, ad amendments thereto, a severity level nine (9) non-person felony, or other applicable criminal charges.</p> <p>I hereby declare under penalty of perjury that all of the statements made in this application are true and correct and that:</p> <ol style="list-style-type: none"> <li>1. Pursuant to K.S.A. 75-7c05, I hereby waive confidentiality in my mental health and medical records as are necessary to determine my qualifications under the KPFFPA;</li> <li>2. The information contained in this application, and any documents or items submitted with it, is true, correct and complete to the best of my knowledge.</li> <li>3. <b>I understand that a criminal history records check will be conducted and may include access to expunged records, and that other investigations may be conducted to determine my eligibility.</b></li> </ol> <p><b>Signature:</b> _____ <b>Date:</b> _____ <b>Print Name:</b> _____</p>

**Section V: Permission to Publish Name, Phone Number, Email Information**

**The name, city and county of all certified concealed carry instructors is listed in the Attorney General's directory of certified instructors. The directory is made available to the public on the Attorney General's web site at [www.ksag.org](http://www.ksag.org).**

If you wish to have your phone number, email address or business web site published on the Attorney General's web site, please complete the following. Only those items you authorize below will be published. Please limit listings to one phone number, one email address and one web address. It is the responsibility of each instructor to notify the Attorney General of any changes to the published information. Changes should be faxed to the Concealed Carry Unit, 785-368-6468, or emailed to [ksagcc@ksag.org](mailto:ksagcc@ksag.org).

I authorize the Attorney General to publish the following information on the Internet listing of Kansas certified concealed carry instructors:

Name (please print): \_\_\_\_\_

Phone number, including area code: (\_\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

Business web address: \_\_\_\_\_

I understand it is my obligation to check the web site at [www.ksag.org](http://www.ksag.org) for accuracy of the above and then notify the Attorney General of any changes I want to make, including removal of my contact information.

Certified Instructor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Mail Application To: Concealed Carry Unit  
Office of Attorney General  
720 SW Jackson, Suite 204  
Topeka, KS 66603

Questions? Call.....785-291-3765  
Email .....[ksagcc@ksag.org](mailto:ksagcc@ksag.org)