

Otero County Sheriff's Verified Instructor Application / Renewal Form

Deliver to: 220 E 2nd St., La Junta, CO 81050

Are you currently a verified instructor with the Otero County Sheriff's Office? ☐ No ☐ Yes Expiration date: _____		Type of verification requested, and associated fee: ☐ New = \$100.00 ☐ Renewal = \$50.00	
Address of the principal place where you conduct firearms training (Location must be in Otero County):		The application fee must be paid BEFORE this form can be submitted. Payable by cash, check, or money order.	
Applicant's Name (Last, First, and Middle):		Email:	
Current Home Address: _____		City / State / Zip: _____	Personal Phone Number: _____
Mailing Address (if Different from Above): _____		City / State / Zip: _____	
Business Name for Firearms Training: _____		Business Email (if different from above): _____	
		Business Website (if any): _____	
Business Address of Firearms Training: _____		City / State / Zip: _____	Business Phone Number: _____
Type of classes you offer (check all that apply): ☐ Concealed Handgun Training Class (Initial or first-time) ☐ Refresher class ☐ BOTH			
Name and Address of Organization Certifying You as a Firearm Instructor: _____	Type of Organization Certifying You as Instructor: ☐ Federal, State, County, or Municipal Law Enforcement Agency ☐ College or university ☐ Nationally recognized organization that offers firearms training ☐ Firearms Training School		Certification Number: _____
			Certificate Expiration Date: _____
Colorado CHP Permit No.: _____	Colorado CHP Permit Expiration: _____	Colorado CHP County of Issue: _____	
Attach a copy of <u>all</u> documents listed below (Documents of poor quality may be rejected): ☐ Concealed Handgun Permit ☐ Receipt for Payment of Application Fee ☐ Driver's License ☐ Copy of your Firearms Instructor Training Certificate(s) ☐ Instructor Certification of Compliance with Statutory Instruction Requirements ☐ Copy of Course Curriculum			
ACKNOWLEDGMENT AND RELEASE OF INFORMATION - I acknowledge that I have read, understand, and am abiding by all requirements of HB24-1174. - I understand that C.R.S. § 18-12-202.7(3)(c) requires the Sheriff to maintain a record of my name as a verified instructor and to post my name and the expiration of my instructor's verification on the Sheriff's website. I consent to this information being released to the public and posted on the Otero County Sheriff's website. - I affirm that the information on this Application is true, correct, and complete, and I acknowledge and understand that the information I have provided on this Application will be verified by the Sheriff's Office. Signature: _____ Date: _____			
Below section for CHP staff only – DO NOT WRITE BELOW THIS LINE			
	Initials:	Date:	Notes:
All documents received			
Information Verified			
STATUS <i>*If not approved, the sheriff's office shall notify the person in writing.</i>			Circle one: Approved Denied Revoked Suspended
Updated LOG			
Updated on website			
Updated CHP list			
Scanned into EDMS			