

HONOLULU POLICE DEPARTMENT CITY AND COUNTY OF HONOLULU



Application for Verification to Administer Firearms Course

The undersigned hereby requests verification to administer the firearms course and tests required by Rule 15-19 of the Rules of the Chief of Police. I fully understand that HPD verification of my application does not constitute an endorsement by HPD of my services; that I am responsible for ensuring that the firearms course satisfies the requirements of Rule 15-19 and all other laws; and that this Verification shall expire two years from the date of issuance.

name						
Last		First		Mide	alle	
	(Alias(es) Nickname(s) Maiden Name)					
Home Address	(Including Apt.#/Area/Zip Code)			Phone		
Business Name _	(moduling / p.m// modulip codd)					
Business Address	(Including Apt.#/Area/Zip Code)			Phone		
	(ag , p,ap					
Date of Birth	Place of Birth	h		U.S. Citiz	en YE	s□no□
U.S. Passport/Nat	uralization No(If Born Outs	side of U.S.A)	Social Se	ecurity No		
Race	Hair	Eyes	Height	WeightA	\ge	Build
List all firearm instru	oction certifications (attach cop	pies of cer	tificates; attach	additional page	s if nec	cessary)
Organization (e.g., NRA), Name	e of Course, and Course Length		Year Completed	Expiration of certi	fication	In person or online
					_	
					_	
					_	
					_	

HPD-150E (11/22) (1/2)

Initial:							
	safety, proper use of firearms, firearm in low-light situations, firearm retention and storage of concealed and unconceased.	t the course will cover the following topics: n restrictions related to domestic violence, on, risks of carrying firearms in public, safe cealed firearms, and firearm regulations a rce, including chapters 134 and 703, HRS	firearm use e carrying nd the law in				
	knowledge of Hawaii law on self-defe	at (circle A or B): (A) I have current and detailed ense and use of force, including chapters 134 and 703, licensed in Hawaii to present on these topics.					
		hat I have not previously been convicted of any criminal ud, and that I have not previously been found liable in dishonesty or fraud.					
	I certify, under penalty of perjury, that I am not legally prohibited from possessing or handling firearms.						
	I have attached a copy of the written examination to be used, and this written examination satisfies Rule 15-19(d)(2) of the Rules of the Chief of Police.						
attachmer administe to my serv	nts are true and correct copies, or originer the firearms course and tests required ving as an instructor.	information above is correct and that all of nal documents, demonstrating my qualifica I by Rule 15-19, and that there is no legal i	itions to				
Applicant	's Signature	Date					
	For Off	icial Use Only					
Instruc	ctor No	Initials	Date				
Valid [Dates	Investigation By:					
		Reviewed By:					
		Issued By:					
	Photo						
		☐ Approved ☐ Denied					

HPD-150E (11/22) (2/2)