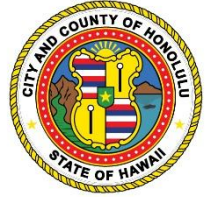




HONOLULU POLICE DEPARTMENT CITY AND COUNTY OF HONOLULU



Application for Verification to Administer Firearms Course

The undersigned hereby requests verification to administer the firearms course and tests required by Hawai'i Revised Statutes ("HRS") §§ 134-2 and 134-9 and Sections §21-15-29 and §21-15-30 of the Rules of the Chief of Police (2024). 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 HRS §§ 134-2 and 134-9 and Sections 21-15-29 and 21-15-30 of the Rules of the Chief of Police (2024) and all other laws; and that this verification shall expire two years from the date of issuance.

Check **one** box: ☐ LTC Instructor Application only ☐ Firearms Safety Course Application only ☐ Both

Name _____
Last First Middle

(Alias(es) Nickname(s) Maiden Name)

Home Address _____ Phone _____
(Including Apt. #/Area/Zip Code)

Business Name _____

Business Address _____ Phone _____
(Including Apt. #/Area/Zip Code)

Occupation _____

Date of Birth _____ Place of Birth _____ U.S. Citizen YES ☐ NO ☐

U.S. Passport/Naturalization No. _____ Social Security No. _____
(If Born Outside of U.S.A)

Race _____ Hair _____ Eyes _____ Height _____ Weight _____ Age _____ Build _____

Email Address _____

List all firearm instruction certifications (attach copies of certificates; attach additional pages if necessary)

Organization (e.g., NRA, include membership #), Name of Course, and Course Length	Year Completed	Expiration of certification	In person or online
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Print Name: _____

Section 1 (Handgun Safety)

1. _____
Initial I certify, under penalty of perjury, that the course will provide at a minimum a total of at least two hours of firing training at a firing range and a total of at least four hours of classroom instruction.
2. _____
Initial I certify, under penalty of perjury, that the course will cover the following topics, and that I have current and detailed knowledge on each topic: The safe use, handling, and storage of firearms, firearm safety in the home, and education on the firearm laws of the City and County of Honolulu and the State of Hawai'i.
3. _____
Initial I certify, under penalty of perjury, that the required component of the training on mental health and suicide prevention will be taught through one or more of the following options.
(Select one or more of the following options):
 - a. _____ I will conduct this portion of the training and attached is evidence of my education and experience in each field.
 - b. _____ A physician, psychologist, social worker, or other health care professional licensed in Hawai'i and with training and experience in these issues will conduct this portion of the training and attached is the name, contact information, and qualifications of the person conducting each of these portions.
 - c. _____ One or more videos will be used to conduct this portion of the training and attached is information on each video that will be used.
4. _____
Initial I certify, under penalty of perjury, that the required component of the training on domestic violence issues associated with firearms and firearm violence will be taught through one or more of the following options.
(Select one or more of the following options):
 - a. _____ I will conduct this portion of the training and attached is evidence of my education and experience in each field.
 - b. _____ An individual with training and experience in domestic violence issues will conduct this portion of the training, and attached is the name, contact information, and qualifications of the person conducting this portion.
 - c. _____ One or more videos will be used to conduct this portion of the training and attached is information on each video that will be used.
5. _____
Initial I certify, under penalty of perjury, that all required information from the course will be provided on a signed affidavit, including my name, address, and phone number, attesting that the applicant has successfully completed the course by meeting the required standards as described in the HRS and the Rules of the Chief. I acknowledge that I will not submit an affidavit with my own signature as an instructor to certify myself.
6. _____
Initial I certify, under penalty of perjury, that I have not previously been convicted of any criminal offense involving dishonesty or fraud, and that I have not previously been found liable in any civil court for any act involving dishonesty or fraud.
7. _____
Initial I certify, under penalty of perjury, that I am not legally prohibited from possessing or handling firearms.

Print Name: _____

Section 2 (License to Carry)

8. _____
Initial I certify, under penalty of perjury, that the course will provide at a minimum a total of at least four hours of classroom instruction, provided that one combined course, with a minimum of four hours of instruction, to satisfy the requirements for Handgun Safety and a License to Carry. This combined course shall include all topics required for Permits to Acquire (Section 1, item 2) and Licenses to Carry (Section 2, item 9).
9. _____
Initial I certify, under penalty of perjury, that the course will cover the following topics, and that I have current and detailed knowledge on each topic: firearm safety, firearm handling, shooting technique, safe storage, legal methods to transport firearms and secure firearms in vehicles, laws governing places in which persons are prohibited from carrying a firearm, firearm usage in low-light situations, and situational awareness and conflict management.
10. _____
Initial I certify, under penalty of perjury, that the required component regarding laws governing firearms, including chapters 134 and 703, HRS, and all other laws in Hawai'i regarding circumstances in which deadly force may be used for self-defense or the defense of another, will be taught through one or more of the following options.
(Select one or more of the following):
- a. _____ I will conduct this portion of the training and attached is evidence of my education and experience in this field.
- b. _____ An active attorney in good standing with the Hawai'i State Bar Association will conduct this portion of the training and attached is the name, contact information, and Hawai'i State Bar Association number.
11. _____
Initial I certify, under penalty of perjury, that the course will include a component on mental health and mental health resources.
12. _____
Initial I certify, under penalty of perjury, that all required information from the course will be provided on a signed affidavit, including my name, address, and phone number, attesting that the applicant has successfully completed the course by meeting the required standards as described in the HRS and the Rules of the Chief. I acknowledge that I will not submit an affidavit with my own signature as an instructor to certify myself.
13. _____
Initial I certify, under penalty of perjury, that I have not previously been convicted of any criminal offense involving dishonesty or fraud, and that I have not previously been found liable in any civil court for any act involving dishonesty or fraud.
14. _____
Initial I have attached a copy of the written examination to be used, and this written examination satisfies Section §21-15-29(4)(C) of the Rules of the Chief of Police.

I declare, under penalty of perjury, that all of the information above is correct and that all of the attachments are true and correct copies, or original documents, demonstrating my qualifications to administer the firearms course and tests required by HRS §§ 134-2 and 134-9 and Sections 21-15-29 and 21-15-30 of the Rules of the Chief of Police (2024), and that there is no legal impediment to my serving as an instructor.

Applicant's Signature _____

Date _____

Print Name: _____

For Official Use Only		
Instructor No. _____	Initials _____	Date _____
Valid Dates _____	Investigation By: _____	_____
	Reviewed By: _____	_____
	Issued By: _____	_____
<div>Photo</div>	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	