TEXAS COMMISSION ON LAW ENFORCEMENT

6330 E. Highway 290, STE. 200 Austin, Texas 78723 - 1035 Phone: (512) 936-7700 http://www.tcole.texas.gov

Qualified Retired Firearms Certificate Texas Occupations Code §1701. 357

Non-refundable \$ 35 fee must be included. Money order or cashier's check only.

Submit PID Assignment form if TCOLE PID has not been issued. Call (512) 936-7700 if questions.

	APPLICANT	INFORMATION	•	
1. TCOLE PID	2. Last Name	3. First Name	4. M.I.	5. Suffix (Jr., etc.)
6. Date of Birth	7. Home or Permanent Mailing Address	8. City:	9. State	10. Zip Code
11. TX DL Number	11. Phone Number (include area code)	12. Email		
An applicant mus	at he a gualified retired law enforcement	nt officer regiding in Toy	aa wha ia antiti	ad to commun
	st be a qualified retired law enforceme n under 18 U.S.C. Section 926C.	nt officer, residing in Texa	as, wno is entiti	ed to carry a
l am a:				
☐ Qualifie	ed Retired Federal Officer (5117)			
☐ Qualifie	ed Retired Out-of-State Officer (5117)			
☐ Qualifie	ed Retired Texas Officer (5121)			
This is a(n);				
☐ Initial A	application (Firearms Proficiency expire	s 12 months from qualificat	tion month)	
☐ Renew	ral / duplicate Application (Photo on file w	rill be used. Attach current c	ertificate of firear	rms proficiency)
NOTE: Application	n for renewal should be made 30 days pri	or to renewal. Current card	s expiration date	
To qualify, ar including sub	n applicant for a Retired Officer Firearms Prof emission of:	iciency Certificate must meet a	all proficiency requi	rements
(a) go (b) OI re ha (2) A sworn (a) the co se (b) the of (c) the ha (d) the	or notarized copies of the following docume overnment issued ID showing a current Texas NLY OUT OF STATE OR FEDERAL OFFICI tired or separated law enforcement officer. The an ID from the agency from which they se affidavit (located on page 2) stating: the officer honorably separated after not less the ore state, local, or federal law enforcement officer after control of the agency from the agency from which they se affidavit (located on page 2) stating: the officer honorably separated after not less the ore state, local, or federal law enforcement officer after control of the agency from the agency from the agency from the agency from the fire of the fire and page of the form of the fire arms proficiency requirements for handguming the officer is eligible to carry a fire arm under Teffire arms proficiency requirements for handguming the fire arms proficiency requirements for handguming the fire arms are also as a commission of the fire arms proficiency requirements for handguming the fire arms are also as a commission of the fire arms are also as a commission o	residence; ERS - government issued ID of 18 USC 926(c) requires that parated. It agencies; or separated with agencies; or separated with agency; was not revoked or suspended disability that would interfere the transport of the	a qualified law ence as a commission the less than 10 yeationary period of state of the law ence and the less than 10 yeationary period down with the officer's 157 or 18 USC Sec	forcement officer med officer with one ears of service as such service, due to uring the officer's ter proper handling of tion 926C; and
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	st that I meet the requirements for issuance or on-refundable \$35 fee.	i a κετίτεα Οπίζει Firearms Pr	oliciency (1701.35	/ OC) and
I, the applicant, am finformation to be tru	ully aware that this application is a governme e and correct.	nt document and, under penal	ty of perjury, I decl	are the foregoing
Signature of Applic	cant	 		

CERTIFICATE OF FIREARMS PROFICIENCY

(Commission Rule §218.9(c)(1)							
Applicant							
First Name	M.I.	Last Name				TCOLE PID	
Firearms Instructor							
First Name	M.I.	Last Name	Last Name			OLE Firearms Instructor	
Rodney	Е	Townsend	send ☑ LTC Instructor #		C Instructor #		
Law Enforcement Agency/Busine	ss Name)	N	lailing Address	L		
Go Heeled, LLC			5	l6 Red Oak Dr			
City	County		Zip Code Telephone Number				
Boerne	Kenda			78006		32-390-1775	
Range Location (if other than the	above a	ddress)			Date of	Qualification	
I, Rodney Townsend TCOLE Firearms Instructor/LTC Instructor Firearms proficiency requirements as established in Commission Rule §218.9 (c)(1) under the following conditions: (1) B-27 or similar silhouette target; (2) Combat scoring; (3) A minimum of 50 rounds; (4) Fired at ranges from point blank to at least 15 yards with a least 20 rounds at or beyond sevenyards; (5) Including at least one timed reload; and (6) Minimum passing percentage of 70 (175 out of a possible 250 for 50 rounds). I am fully aware that this firearms proficiency certification is a government document and, under penalty of perjury, I declare the foregoing information to be true and correct.							
Signature of TCOLE Firearms Instruct	tor/LTC In:	structor				Date	
		Affid	avi	t			
I,		_, do swear or affirm that	l n	neet the requirer	ments e	established in the Texas	
and Chapter 44, Title 18, Unite resident. I honorably retired af	ed State ter not le ement aç	s Code, Section 926C(c ess than a total of 10 yea gencies or federal crimina) Q ars al ir	ualified Retired I of service as a d nvestigator as de	Law En commis esignate	and Federal Criminal Investigators of the forcement Officers. I am a Texas of the force of the f	

Section 926C. My license or authority as a commissioned officer was never revoked or suspended for any period during my term of service as a commissioned officer. I was not retired for reasons of mental instability and have no psychological or physical disability that would interfere with the proper handling of a handgun. I have met the minimum qualifications for a handgun as established in Commission Rule §218.9(c)(1).

Signature of Applicant		Date	
Sworn to and ascribed before me the undersigned official on this_	day of		

Notary Public

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PID ASSIGNMENT (C-1)

THIS FORM IS ONLY FOR RETIRED FEDERAL/OUT OF STATE OFFICERS

Completion of all fields required.

INDIVIDUAL INFORMATION 1. Social Security Number 2. First Name 3. M. I. 4. Last Name 5. Suffix (Jr., etc.) 6. Race / Ethnicity 7. Date of Birth 8. Gender 9. Driver's License State: American Indian or Alaskan Native Asian □ Black □ Hispanic ☐ Multicultural ☐ White □ Female Num.: 10. Home Mailing Address 11. City 12. State 13. Zip Code 14. Height 15. Weight 16. Hair Color 17. Eye Color 18. U.S. Citizen 19. Phone Number (include area code) 20. Email ☐ Yes □ No This form is to be submitted only for the express purpose of having a personal identification number (PID) assigned by TCOLE to the above named individual therein creating a TCOLE record and allowing training to be reported for that individual. Agency administrator or training coordinator check appropriate box for their student or employee. Applying for entry into a basic licensing course. Applicant has read and received a copy of §217.23 Basic Licensing Enrollment Standards Signature of Applicant Date Future appointment as a Telecommunicator, Temporary or Licensed Future appointment as a County or Contract Jailer, Temporary or Licensed Future Appointment as a Probation Officer, Juvenile or Adult TCOLE agency / training provider number and Name Agency Administrator or Training Coordinator (Typeor Print) Signature Date Individuals not associated with a training provider or agency check below. Applying for instructors certificate Applying for Retired Federal Firearms ID Applying for consideration of prior out-of-state, federal, military, or TDCJ training.

Signature of Applicant

Date