

HANDGUN LICENSING

- MUST USE MOST CURRENT FORM
- PRINT CLEARLY IN BLACK INK OR TYPE
 MAKE SURE SQUARE IS CHECKED

Clearly mark your options.

EXAMPLE: V

LTC INSTRUCTOR DISCLOSURE INFORMATION (OPT-IN LIST)

REQUIRED INFORMATION Please PRINT or TYPE legibly.	
Instructor Certificate # For department use only – this number will not be published.	
Name: As it appears on the INSTRUCTOR Certificate – Alternate name in parenthesis.	
APPLICANT INFORMATION	
Please select all that should be published and to which you hold a current certificate	
☐ LTC Instructor	
First Responder Instructor	
School Safety Instructor	
Online Course Provider	
OPTIONAL INFORMATION Provide ONLY the information you wish to have published.	
Website:	
Email:	
Phone: (Numbers only)	
County: List no more than four primary counties. Note: Online Course Providers will not be listed by county on our website.	
	
Available to teach statewide	
By submitting this form, I consent to the publication of the provided information on the department's public website and am waiving any claim of confidentiality relating to this information. Submit your completed OPT-IN form through email at RSD_LRS_LTC@dps.texas.gov	
Instructor Signature	Date