

# STATE OF IDAHO

## CONCEALED WEAPONS LICENSE APPLICATION

COUNTY OF ISSUE		Application Type: Initial <input type="checkbox"/> Renewal <input type="checkbox"/> License: 18-3302 Concealed <input type="checkbox"/> 18-3302K Enhanced Concealed <input type="checkbox"/>		
Last Name	First Name and Middle Initial	Date of Birth	Place of Birth	SSN (optional)
Aliases: Any name used or known by		Sex	Weight	Height
Address		D/L or ID Card Number		Military Status
City, State Zip		Country of Citizenship		Alien or Admission Number

**CAUTION: Federal and state laws on the possession of weapons and firearms differ. If you are prohibited by federal law from possessing a weapon or a firearm, you may be prosecuted in federal court. A state permit is not a defense to a federal prosecution.**

List all firearms training including the date completed:

**NOTE:** According to Federal Code, 18 USC Sec. 921-922, the following persons are prohibited from receiving a firearm: fugitives from justice; persons who are unlawful users of or are addicted to narcotics or any other controlled substances; persons adjudicated as a mental defective or who have been committed to a mental institution; persons who have been convicted in any court of a crime punishable by imprisonment for a term exceeding one (1) year; persons who are under indictment for a crime punishable by imprisonment for a term exceeding one (1) year; military veterans discharged under dishonorable conditions; persons who have renounced U.S. citizenship; aliens illegally in the U.S.; persons subject to a court order that restrains them from harassing, stalking, or threatening an intimate partner or child of such intimate partner; and persons convicted in any court of misdemeanor crime of domestic violence.

### APPLICANTS MUST ANSWER THE FOLLOWING QUESTIONS

YES	NO	(check appropriate box)
		Are you under twenty-one (21) years of age?
		Have you been a legal resident of the state of Idaho for at least six (6) consecutive months, or hold a current concealed weapons license or permit in the state of residency, before filing this application? (For Enhanced Concealed Carry only)
		Are you formally charged with a crime punishable by imprisonment for a term exceeding one (1) year?
		Have you ever been adjudicated guilty in any court of a crime punishable by imprisonment for a term exceeding one (1) year?
		Are you a fugitive from justice?
		Are you an unlawful user of or addicted to marijuana or any depressant, stimulant or narcotic drugs, or any other controlled substance as defined in 21 U.S.C. 802?
		Are you currently suffering from or have you been adjudicated as having suffered from any of the following conditions, based on substantial evidence: (1) lacking mental capacity as defined in Section 18-210, Idaho Code; (2) mentally ill as defined in Section 66-317, Idaho Code; (3) gravely disabled as defined in Section 66-317, Idaho Code; or (4) an incapacitated person as defined in Section 15-5-101, Idaho Code?
		Have you been discharged from the armed forces under dishonorable conditions?
		Have you received a period of probation after having been adjudicated guilty of, or received a withheld judgment for a misdemeanor offense that has an element of intentional use, attempted use or threatened use of physical force against the person or property of another and NOT successfully completed probation?
		Are you an alien illegally in the United States?
		Have you, having been a citizen of the United States, renounced your citizenship?
		Are you free on bond or personal recognizance pending trial, appeal or sentencing for a crime which disqualifies you from obtaining a concealed weapon license?
		Are you a respondent to a protection order issued under chapter 63, title 39, Idaho code or a similar order in another jurisdiction?
		Have you ever been convicted in any court of a misdemeanor crime of domestic violence?
		Are you eligible to own, possess or receive a firearm under Idaho and federal law?

List all states you have lived in during the past ten (10) years:

**Under penalty of Idaho Code 18-3302 C (2), I certify I have read the entire text of this form and my statements set forth are true and correct. This application may take a minimum of ninety (90) days to process.**

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

**Do not write in this space**

This applicant has provided completion documentation of the required training for the license type.  
 Approved     Denied    Reason for denial \_\_\_\_\_

SIGNATURE OF SHERIFF OR DESIGNEE \_\_\_\_\_ DATE \_\_\_\_\_



# Idaho State Police

## Bureau of Criminal Identification



### NONCRIMINAL JUSTICE APPLICANT PRIVACY STATEMENT

As an applicant who is the subject of a national fingerprint-based criminal history record check for a non-criminal justice purpose you have certain rights which are discussed below.

This serves as notification from LINCOLN COUNTY SHERIFF that your fingerprints will be used to check the criminal history records of the State of Idaho and the FBI and that those records will be used solely for the purpose requested and may not be disseminated outside the receiving department, related agency or other authorized entity. The collection of applicant fingerprints in Idaho is authorized by Idaho Code §67-3008.

- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- Procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record, or decline to do so, before being denied the job, license, or other benefit based on information in the criminal history record.
- Disclosure of your Social Security number is voluntary and is solicited pursuant to the Federal Privacy Act and Idaho Code §67-3012 to aid the processing of an interstate background check request for noncriminal justice purposes allowed by federal statute, federal executive order or a state statute that has been approved by the attorney general.

The fingerprints and information reported from this request may be disclosed pursuant to your consent, and may also be disclosed by the FBI without your consent as permitted by the Federal Privacy Act of 1974 (5 USC 552a(h)). Routine uses include, but are not limited to, disclosures to appropriate governmental authorities responsible for civil or criminal law enforcement, counterintelligence, national security or public safety matters to which the information may be relevant; to State and local governmental agencies and nongovernmental entities or application processing as authorized by Federal and State legislation, executive order, or regulation, including employment, security, licensing, and adoption checks. Depending on the nature of your application, other authorities may include numerous Federal or State statutes pursuant to Public Law 92-544 or other authorized authorities.

According to Idaho state law and if agency policy permits, you may be provided a copy of your FBI criminal history record for review and possible challenge upon submission of a written request. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI at the same website address as provided above. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30-16.34)

If a change, correction or update needs to be made to an Idaho criminal history record, that process information is available on the Idaho State Police website. [http://www.isp.idaho.gov/BCI/documents/CRBrochure1\\_000.pdf](http://www.isp.idaho.gov/BCI/documents/CRBrochure1_000.pdf)

Your signature below acknowledges this agency has informed you of your privacy rights for fingerprint-based background check requests used by the agency for non-criminal justice purposes.

I do  do not  want a copy of the Privacy Act Statement.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

700 S. Stratford Dr., Ste. 120  
Meridian, ID 83642

Apr-15