



CARRYING CONCEALED DEADLY WEAPONS
ARMED FORCES HANDGUN TRAINING AFFIDAVIT

Affiant, first being duly cautioned and sworn, avers under oath and under penalty of perjury as follows:

1. My name is (please print): _____ ;
2. I have applied for a Carry Concealed Deadly Weapons (CCDW) license from the Department of Kentucky State Police (KSP);
3. My CCDW Application Number is: _____ ;
4. My social security number is: _____ - _____ - _____ ;
5. My date of birth is: _____ ;
6. I am an honorably discharged service member in the United States Army, Navy, Marine Corps, Air Force, or Coast Guard, or a reserve component thereof, or of the Army National Guard or Air National Guard, and I have met one or more of the training requirements listed below:
 - a. Successfully completed handgun training which was conducted by the United States Army, Navy, Marine Corps, Air Force, or Coast Guard, or a reserve component thereof, or of the Army National Guard or Air National Guard; or
 - b. Successfully completed handgun qualification within the United States Army, Navy, Marine Corps, Air Force, or Coast Guard, or a reserve component thereof, or of the Army National Guard or Air Force National Guard.
7. I am aware and agree that the information provided herein may be verified by KSP with the United States Department of Defense and its military departments, and/or other appropriate government agencies, and I authorize the release of any records by these entities to KSP for verification purposes.

Further Affiant sayeth naught.

Affiant Signature

STATE OF _____

COUNTY OF _____

Sworn to, acknowledged, and subscribed before me by Affiant, this _____ day of _____, 20____.

Notary Public State At Large

My commission expires: _____