Arizona Supreme Court - Education Services
Firearms or Defensive Tactics Instructor Application

Application Instructions:
1. Sections A and B should be filled out by the applicant.
2. Section C should be signed by the applicant's chief or director.
3. Please send the completed application to the AOC Education Program Manager, Chad Kewish at 1501 W. Washington, Phoenix, Arizona 85007.

PERSONAL INFORMATION – Section A

Full Name: _____

Phone Number: (_____) _____ - _____ ext. ____

Email Address: _____ @ _____

Department: _____

Job Assignment: _____

Years of Service: _____

Desired Instructor Position: DT ☐ FT ☐

QUALIFICATIONS – Section B

1.	**Have you completed Faculty Skills Development?**	**Yes☐**	**No☐**	**Date:_____**
2.	**Do you have a current CPR Certification?**	**Yes☐**	**No☐**	**Expires:_____**
3.	**Do you have a current First Aid Certification?**	**Yes☐**	**No☐**	**Expires:_____**
4.	**Have you completed the DT Academy?**	**Yes☐**	**No☐**	**Date:_____**
5.	**Have you completed the Firearms Academy?**	**Yes☐**	**No☐**	**Date: _____**

Note: Only applications that have ATTACHED all documentation in the Qualifications Section B above will be considered.

Shirt Size: _____(Small, Medium, Large, XLarge, 2XLarge)

*****FIREARMS APPLICANTS ONLY*****
You will be required to demonstrate a score of 90% or above on the AOC Qualification Course prior to acceptance into the Firearms Train the Trainer course and prior to approval of this application.

I received a 90% or above on the AOC Qualification Course on _____ with _____, a certified Firearms instructor.

ADDITIONAL FIREARMS OR DEFENSIVE TACTICS EXPERIENCE:

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SIGNATURES – Section C

Chief or Director: _____ _____ _____
(Signature) **(Print Name)** **(Date)**

AOC Ed. Program Manager: _____ _____ _____
(Signature) **(Print Name)** **(Date)**