



Texas Department of Public Safety  
Regulatory Services Division

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**LICENSE TO CARRY A HANDGUN PROFICIENCY COURSE  
CERTIFICATE OF TRAINING**

STUDENT INFORMATION			
Last Name <b>EVANS</b>		First Name <b>VICKY</b>	Middle Initial <b>L</b>
Driver License Number <b>37034751</b>	Issuing State (2- letter code) <b>TX</b>	ID Number	Issuing State (2- letter code)
CLASSROOM TRAINING			
Laws That Relate to Weapons / Use of Force	Hr <u>2</u>	Min <u>30</u>	
Safe Storage	Hr <u>0</u>	Min <u>30</u>	
Non-Violent Dispute Resolution	Hr <u>1</u>	Min <u>0</u>	
Handgun Use and Safety (Including use of restraint holsters)	Hr <u>1</u>	Min <u>30</u>	
Total Classroom Time: Hr <u>5</u> Min <u>30</u>			
My signature verifies the above named individual has received a minimum of 4 hours and a maximum of 6 hours classroom instruction and successfully passed the required written test for a Texas License to Carry a Handgun.			
Terry A. Barber LTC Instructor Name (printed)	01438725 Instructor #	<i>Terry A. Barber</i> LTC Instructor Signature	03/31/2018 Completion Date (MM/DD/YYYY)
PROFICIENCY DEMONSTRATION			
Name of Range (if any) Shooters Firearms Training Academy, LLC		<input type="radio"/> LTC Instructor renewal	
Address 11501 County Road 346			
City Terrell	State TX		
My signature verifies the above named individual has successfully demonstrated proficiency using the required course of fire for a Texas License to Carry a Handgun.			
Terry A. Barber LTC Instructor Name (printed)	01438725 Instructor #	<i>Terry A. Barber</i> LTC Instructor Signature	03/31/2018 Completion Date (MM/DD/YYYY)
STUDENT CERTIFICATION			
I verify that the information provided is true and correct. I also understand this is an official Government record and any missing information and/or false statement made on this document may result in criminal prosecution.			
<i>Vicky L. Evans</i> Student Name (printed)		<i>Vicky L. Evans</i> Student Signature	03/31/2018 Date (MM/DD/YYYY)