



Instructor Application

Referred By _____

Last Name: _____ First Name: _____ MI: _____

Date of Birth: ____/____/____ ☐ Male ☐ Female Ethnicity: _____

Address: (for ups delivery) _____ City: _____

Zip: County: _____ Occupation: _____

Home Phone: _____ Cell Phone: _____ Daytime Phone: _____

Email Address: _____

County wanting to teach in: _____

Firearm Owners Identification (FOID) Card no.: _____ "or"

Carry Concealed Holder Card No.: _____

Do you have any practical teaching experience? ☐ Yes ☐ No If yes, please explain: _____

Briefly explain why you are interested in becoming a Safety Education Instructor/Volunteer: _____

Have you ever been convicted of felony or misdemeanor (including a conservation offense), other than a traffic offense within the last five years in Illinois or any other state? ☐ Yes ☐ No If yes, please explain: _____

*(Note: Previous conservation offenses and misdemeanors will not automatically disqualify an applicant.
The age and nature of the offense(s) will be taken into consideration).*

If selected as a Safety Education Instructor/Volunteer I will follow the course outlined by the Office of Law Enforcement and Safety Education Section. I will comply with all the policies and procedures. I hereby attest that the above information is true and correct. I also give my permission to the Illinois Department of Natural Resources, to complete a background check on me, before accepting my application and proceeding with my consideration for certification.

Signed: _____

Date: _____

