

Schenectady County
Advanced Firearm Course for an Unrestricted Pistol Permit
Application Form

Name

Address

City

State

Zip

Phone Number

DOB (dd,mm,yyyy)

NYS Pistol Permit #

County of Issuance

Date of Issuance (dd,mm,yyyy)

Photo Copy of Permit Attached

Please explain previous firearms training or experience. Describe your experience with handling and using firearms such as military training, competitive shooting, NRA training or hunting.

Signature of Applicant

Date