CONCEALED HANDGUN LICENSING BUREAU

Class Notification

Please be advised that I will be conducting a Concealed Handgun School at the location(s) listed below along with the date(s) and time(s).

	<u>Date</u>	<u>Time</u>	Classroom Location	Range Name/Location
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Please Print:	
INSTRUCTOR NAME:	
LICENSE #:	
You may fay this Class Notification at least 2.4 wooks hefere training	

You may fax this Class Notification at least 2-4 weeks before training to 512-424-7284 or www.dps.texas.gov/rsd/contact/default.aspx

Privacy Policy: (1) with few exceptions, the individual is entitled on request to be informed about the information that the state governmental body collects about the individual; (2) under Sections 552.021 and 552.023 of the Government Code, the individual is entitled to receive and review the information; and (3) under Section 559.004 of the Government Code, the individual is entitled to have the state governmental body correct information about the individual that is incorrect.