

# Application for Firearm Use

**1. Applicant Information** (Applicant is person who will have custody and control of the firearm)

Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Department: \_\_\_\_\_  
Start/End Dates of Use: \_\_\_\_\_

**2. Details of Request** (Attach additional information if needed)

Justification for Firearm Use: \_\_\_\_\_  
\_\_\_\_\_

Location of Fieldwork (i.e. Brooks Range, Nome, etc.): \_\_\_\_\_  
\_\_\_\_\_

Procedures for securing/storing firearms when not in use: \_\_\_\_\_  
\_\_\_\_\_

Name of individuals accompanying the applicant: \_\_\_\_\_  
\_\_\_\_\_

**3. Firearms Specifications & Training Dates**