

STATE OF NEW MEXICO
DEPARTMENT OF PUBLIC SAFETY
Concealed Carry Unit



Biennial Training
for
NM DPS Concealed Carry Instructors

Why are we here?

Effective January 1, 2004, the department is authorized to issue concealed handgun licenses to qualified applicants. Original and renewed concealed handgun licenses shall be valid for a period of four years from the date of issuance, unless the license is suspended or revoked.

- Because the NMAC says so [NMAC 10.8.2.25]
- Discover why DPS CCU requires certain procedures
- Become familiar with what DPS CCU REALLY does
- Get to know everybody and Network



Introductions: Concealed Carry Unit Staff

Paula Vigil
CCU Staff

Deserae Griego
CCU Staff

Jessica Roybal
CCU Staff

Vacant
CCU Staff

Antonio Otero
Instructor Program Coordinator

Angie Cormier
Concealed Carry Unit Supervisor

Jackee Garcia
Staff Manager

Vacant
Bureau Chief





Introduce yourself

How long have you been a concealed carry instructor?

What are you hoping to gain from this course?

If you could choose any other profession, what would it be?



Group Project



Breakout Groups

Break into groups

Discuss and select two questions you've heard from students that were difficult to answer.

- ❖ **Why was the question difficult to answer?**
- ❖ **What did your group decide is the best way to answer the question?**
- ❖ **What would you do differently?**

Select one person from you group to present questions.



Student Applications



Applicant, qualifications [NMSA 1978 29-19-4 § (2003)(A)]

- ☒ (1) is a citizen or legal resident of the United States;
- ☒ (2) is a resident of New Mexico OR is a member of the armed forces whose permanent duty station is located in New Mexico
- ☒ (3) is twenty-one years of age or older;
- ☒ (4) is not a fugitive from justice;
- ☒ (5) has not been convicted of a felony in New Mexico or any other state







Cont... Applicant, qualifications [NMSA 1978 29-19-4 § (2003)(A)]

- ☒ (6) is not currently under indictment for a felony criminal offense in New Mexico or any other state
- ☒ (7) is not otherwise prohibited by federal law or the law of any other jurisdiction from purchasing or possessing a firearm
- ☒ (8) has not been adjudicated mentally incompetent or committed to a mental institution
- ☒ (9) is not addicted to alcohol or controlled substances; and
- ☒ (10) has satisfactorily completed a firearms training course approved by the department.



Applicant, qualifications [NMSA 1978 29-19-4 § (2003)(B)]

The department shall deny a concealed handgun license to an applicant who has:

-  (1) received a conditional discharge, a diversion or a deferment or has been convicted of, pled guilty to or entered a plea of nolo contendere to a misdemeanor offense involving a crime of violence within ten years immediately preceding the application;
-  (2) been convicted of a misdemeanor offense involving driving while under the influence of intoxicating liquor or drugs within five years immediately preceding the application for a concealed handgun license;
-  (3) been convicted of a misdemeanor offense involving the possession or abuse of a controlled substance within ten years immediately preceding the application; or
-  (4) been convicted of a misdemeanor offense involving assault, battery or battery against a household member.

What is a **CONVICTION** ? [NMAC10.8.2.7(D)]

Conviction means an adjudication of guilt, and includes a guilty plea, judgment, or verdict, no contest, nolo contendere, conditional plea of guilty, or any other plea that would result in an adjudication of guilt in any court of competent jurisdiction. A conviction includes a deferred sentence and a conditional discharge prior to satisfaction of the conditions and after satisfaction of conditions where required by the act.



Hearing Procedures [NMAC 10.8.2.27]

B. Request for hearing. A respondent who seeks reconsideration of a notification of denial, suspension, or revocation shall file a request for hearing. The request for hearing shall:

- (1) be in writing;
- (2) be received by the department within 30 days on the notification;
- (3) state with specificity the basis for challenging the notification; and
- (4) provide any additional documentation to support the challenge.



COURT PERSONNEL ONLY
Beyond This Point

Pre-screening students

Find out **before** someone sends the money that they were not eligible.
Application fees are non-refundable once submitted.

For applicants who *might* be eligible, but have legal problems in their history, the burden of proof of disposition of any charges falls upon the student.

NMAC 10.8.2.12(D)



Initial 15-Hour Course

A 15-hour (minimum) Initial course is mandatory, with a few exceptions, to receive a New Mexico Concealed Carry License.

The Certificate of Completion for an Initial Course can be submitted by the applicant up to **90 days** following the date on the Certificate of Completion.

Initial AAR

-Send to DPS CCU

Initial Course Completion Certificate

-Give to student to submit with application



Renewal 4-Year Course

A 4-hour renewal course is mandatory, along with a previously completed 2-year refresher, to renew a New Mexico Concealed Carry license.

The Certificate of Completion for a renewal can be completed within **60 days before** or **60 days after** a license expiration date. [NMAC 10.8.2.17(A)(1)]

Renewal AAR

-Send to DPS CCU

Renewal Course Completion Certificate

-Give to student to submit with application



Refresher 2-Year Course

The 2-year refreshers are a requirement of NM Concealed Handgun Carry License holders.

[NMSA 1978 29-19-6(H); NMAC 10.8.2.15(A)(2)]

Completion of a 2-year or midpoint Refresher Course is **MANDATORY** for future license renewal.

Refresher is a 2-year or midpoint instruction course, to be completed within **60 days before** or **60 days after** the 2-year or midpoint following the initial 15-hour course or a 4-year renewal.

Refresher AAR

-Send to DPS CCU

Refresher Course Completion Certificate

-Send to DPS CCU



Refresher 2-Year or Midpoint Course

Options for license holder [NMAC 10.8.2.15(A)(2)]

1. Range qualification with their approved caliber of handgun
2. Online option is no longer available as of 6/30/2023



MILITARY SERVICE PERSONS - REQUIREMENTS -

- A. ... For a military service person discharged from military service within twenty years of the application for a license or renewal of a license, a firearms training course or refresher firearms course is not required.

What about military service persons outside of twenty years?

They must complete the training.



What is an endorsement? [NMAC 10.8.2.18]

If a licensee wishes to **add another category** or **additional higher calibers of handguns** to his or her license, the licensee shall file with the department an endorsement application. The licensee shall also submit a certified copy of a certificate of completion from an approved instructor stating that the licensee has demonstrated competency on a firing range for each additional category and caliber of handgun, his or her current license, and a **\$10 processing fee**. The licensee need not retake the classroom portion of the firearms training course. The department shall issue an updated license within 10 days of receipt of the application. The updated license shall expire on the same date as the original license would have expired. In accordance with Section 29-19-9 NMSA 1978, a licensee shall not carry the higher caliber concealed handgun until her or she received the updated license.

[10.8.2.18 NMAC - Rp 10.8.2.18 NMAC, 11-30-16]



Transfer license from another state

Two questions to ask:

Do we have reciprocity with this state they want to transfer from?

Did they complete a qualification with that state within the last 12 months?

If *yes to both*: They would complete a 4-year renewal course with a NM DPS-approved instructor and must provide a copy of the qualification from the state we have reciprocity with when they apply with the department.

If *no to one or both* questions: They must complete the 15-hour initial concealed carry course with a NM DPS-approved instructor.



Important Timelines to Relay to Students

Certificate of completion is good for how many days?

The certificate of completion is good for **90 days** from the course date.

How many days before your expiration can you renew your license?

License holders can begin the process their renewal up to **60 days** before the date of expiration.

How many days after your expiration can you renew your license?

License holders have **60 days** from the date of expiration to renew their license. Once their license has expired it is **no longer valid**, even if they have turned in their paperwork with the department.

What happens after **60 days**?

Students will need to take a new 15-hour class and reapply.



Concealed Carry Permit Application



Student Initial Application Documents

Application Requirements for a License [NMAC 10.8.2.11]

2-page application completed and signed

Photocopy of valid driver's license

Photocopy of birth certificate or passport (if ID isn't a NM Real ID)

Release of Health Information (witnessed)

Release of Information (notarized) **Notary is no longer available at CCU office**

Fingerprinting – digital (Identogo)

Certification of Completion Training Certificate*

Application Fee* **Fees have changed to \$100**



Examples of Documents

Concealed Carry Application (Page 1 of 2)

Type or print your information

New Mexico Department of Public Safety
CONCEALED HANDGUN LICENSE / CONCEALED CARRY HANDGUN INSTRUCTOR
APPROVAL APPLICATION

Read "APPLICATION INSTRUCTIONS" prior to completing this application.
TYPE or PRINT LEGIBLY IN INK.
Your application **WILL NOT** be processed unless/until all applicable questions have been answered on page 2 and all required documents have been submitted.

Be sure to include: IDEMIA fingerprint receipt, authorization to obtain health information form, authorization for release of information form, a current certificate of firearms training, a photocopy of your New Mexico Driver's License or Identification Card, a photocopy of your birth certificate or naturalization certificate (not required if the Driver's License is a Real ID), and payment in the form of personal check, cashier's check, money order, or credit card for the appropriate amount.

FEES ARE NON-REFUNDABLE

<input type="checkbox"/> New License Application	<input type="checkbox"/> Renewal Application (Expiration Date: _____)	Instructor: <input type="checkbox"/> New <input type="checkbox"/> Renewal
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Non-Civilian Licenses: Law Enforcement: ☐ Current ☐ Mounted Patrol ☐ Retired (Retirement Date: _____)
Military: ☐ Active ☐ Veteran (Separation Date: _____)

Last Name: _____ First Name: _____ Middle Name: _____ County of Residence: _____

Social Security Number: _____ Fingerprint TCN: (New Applicant Only) _____ Driver's License or ID Number: _____ DL Issue Date: _____

Date of Birth: (mm-dd-yyyy) _____ Sex: ☐ M ☐ F ☐ X Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____ Race: _____

City of Birth: _____ State of Birth: _____ Country of Birth other than USA: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Physical Address (if different than above): _____ City: _____ State: _____ Zip Code: _____

How long have you lived at the above address? _____ Years _____ Months _____ Home Phone Number: _____ Business Phone Number: _____

Email Address: _____

FOR OFFICE USE ONLY:
Form of Payment: ☐ Money Order ☐ Cashier's Check ☐ Personal Check # _____ ☐ Credit Card
Applicant Name _____
The Department of Public Safety acknowledges that on _____ the sum of \$ _____ was received by: _____
Signature of employee accepting application _____ Printed name of employee accepting application _____

Do not check these boxes unless you are applying or renewing your instructor permit

For DPS office use only

Examples of Documents

Concealed Carry Application (Page 2 of 2)

Read questions thoroughly and answer by selecting “Yes” or “No”.




ALL APPLICANTS PLEASE READ QUESTIONS THOROUGHLY AND ANSWER QUESTIONS BY CHECKING “YES” or “NO”.

	YES	NO
1. Are you a citizen of the United States OR permanent resident?	<input type="radio"/>	<input type="radio"/>
2. Are you a resident of New Mexico OR a member of the armed forces whose permanent duty station is located in New Mexico?	<input type="radio"/>	<input type="radio"/>
3. Are you 21 years of age or older?	<input type="radio"/>	<input type="radio"/>
4. Have you satisfactorily completed a DPS-Approved Firearms Safety Training Program or Renewal Training Program? (Training is not required for active military, veterans under 20 years discharged, and LE retired less than 10 years.)	<input type="radio"/>	<input type="radio"/>
5. Have you been convicted of a felony in New Mexico or any other state or pursuant to the laws of the United States or any other state or pursuant to the laws of the United States or any other jurisdiction?	<input type="radio"/>	<input type="radio"/>
6. Are you currently under indictment for a felony criminal offense in New Mexico or any other state or pursuant to the laws of the United States or any other jurisdiction?	<input type="radio"/>	<input type="radio"/>
7. Are you otherwise prohibited by federal law or the law of any other jurisdiction from purchasing or possessing firearm?	<input type="radio"/>	<input type="radio"/>
8. Have you been adjudicated incompetent or committed to a mental institution?	<input type="radio"/>	<input type="radio"/>
9. Are you an unlawful user of, or addicted to, any controlled substances and/or alcohol?	<input type="radio"/>	<input type="radio"/>
10. Have you received a conditional discharge, a diversion or a deferment, or been convicted of, pled guilty to, or entered a plea of nolo contendere to a misdemeanor offense involving a crime of violence within the last 10 years?	<input type="radio"/>	<input type="radio"/>
11. Have you, within five years immediately preceding this application, been convicted of a misdemeanor offense involving driving while under the influence of intoxicating liquor or drugs?	<input type="radio"/>	<input type="radio"/>
12. Have you been convicted of a misdemeanor offense involving the possession or abuse of a controlled substance within the last 10 years immediately preceding this application?	<input type="radio"/>	<input type="radio"/>
13. Have you been convicted of a misdemeanor offense involving assault, battery, or battery against a household member?	<input type="radio"/>	<input type="radio"/>
14. Since the age of 18, have you been arrested for a disqualifying charge? (Include final disposition documents with application.)	<input type="radio"/>	<input type="radio"/>
15. Are you a fugitive from justice?	<input type="radio"/>	<input type="radio"/>
16. Are you an alien who is residing in the United States illegally or a former citizen of the United States who has renounced citizenship?	<input type="radio"/>	<input type="radio"/>
17. INSTRUCTOR APPLICANTS ONLY Do you meet ALL training instructor criteria required under NMAC 10.8.2.2?? (If yes, include all proper documentation).	<input type="radio"/>	<input type="radio"/>

WARNING: Submission of a false answer to any question or submission of a materially false document will result in the denial of the application and may result in criminal prosecution for perjury (NMSA 30-25-1). Tampering with public records may result in criminal prosecution under NMSA 30-26-1.

I HEREBY STATE UNDER PENALTY OF LAW THAT:

- I have read the New Mexico Concealed Handgun Carry Act of 2003 and qualify to apply for a concealed handgun license;
- I have been furnished with a copy of the state laws relating to concealed handguns and have read and understand them;
- I want a permit to carry a concealed handgun for lawful purposes, which may include self-defense;
- The information in this application and any documents submitted in this application is true, correct, and complete to the best of my knowledge and belief; and
- I understand a license eligibility investigation will be conducted as a part of the application process; this may involve, but is not limited to, computerized record searches/ criminal history searches and I authorize the investigation.

		
Signature of Applicant	Printed Name	Date

This question is for firearm instructor applicants only. It is the only question that can be left blank if it does not apply to you.

Applications must be signed and dated.

Important Note

29-19-53 A conspicuous warning that the application form is executed under penalty of perjury and that a materially false answer or the submission of a materially false document to the department may result in denial or revocation of a concealed handgun license and may subject the applicant to criminal prosecution for perjury as provided in Section 30-25-1 NMSA 1978.

What does this mean?

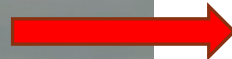
Read all questions on the application and answer honestly. Only submit credible documents. Failure to do so can result in criminal prosecution for perjury.



Examples of Documents

Authorization to Obtain Health Information Form

Type or print name



**NEW MEXICO DEPARTMENT OF PUBLIC SAFETY
AUTHORIZATION TO OBTAIN HEALTH INFORMATION**

This authorization allows the New Mexico Department of Public Safety (DPS) to obtain confidential health information about you. The authorization may be revoked by you. It will remain in effect indefinitely solely for purposes of obtaining information regarding your Concealed Handgun Carry Act application or permit. You are entitled to a copy of the completed authorization. There may be fees charged for any copying associated with this request. If you are a person with a disability and you require this authorization in an alternative format or require a special accommodation to complete this form, you may request assistance from staff at any DPS location.

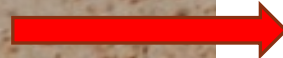
Applicant Name Printed (First, Middle, Last)

1. I authorize the Department of Public Safety to obtain health information as described below.
2. I understand that any information disclosed by any provider of any kind may include information about behavioral or mental health services, and treatment for alcohol or drug/substance abuse and information obtained by the New Mexico Department of Public Safety from any other provider specifically related to the statutory purposes set out in the Concealed Handgun Carry Act at Section 29-19-1 to 29-19-13, NMSA 1978.
3. This authorization applies to any health information from any provider or any source relating to the stated purposes.
4. The health information will specifically be related to (a) adjudication of mental incompetence or any commitment to a mental institution; (b) any addiction to alcohol or controlled substances.
5. This health information shall be utilized in order to assess compliance with the purposes of the Concealed Handgun Carry Act.

STATEMENT OF UNDERSTANDING:

I understand that I have a right to revoke this authorization at any time. I understand that if I revoke this authorization, I must do so in writing to the New Mexico Department of Public Safety. I understand that the revocation will not apply to information that has already been obtained pursuant to this authorization. I understand that unless I revoke this authorization as stated above, this authorization will continue in full force and effect. I understand that authorizing the disclosure of this health information is voluntary. I further understand that revoking this authorization may have consequences regarding my application for a concealed handgun carry permit, or my ability to continue carrying a concealed handgun if I have already been issued a concealed handgun carry permit.

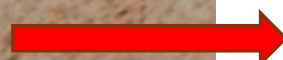
Signature



Signature of Applicant

Date

Signature of witness
(Anyone over the age of 18)



Signature of Witness

Date

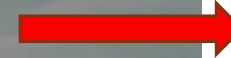


Dates of signatures must match

Examples of Documents

Authorization for Release of Information Form (form must be notarized)

Type or print name, social security number, and date of birth on top line



AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____

NAME (MUST BE PRINTED-LEGIBLY) (SSN#) (DOB)

Alias' Name: _____ SSN: _____ DOB: _____

Name: _____ SSN: _____ DOB: _____

Department of Public Safety - Concealed Carry Unit

NAME OF AGENCY OR PERSON RECEIVING ARREST RECORD _____

ADDRESS: 6301 Indian School Rd. NE Suite 310, Albuquerque, NM 87110

AS AN AUTHORIZED AGENT FOR ME FOR THE PURPOSE OF INSPECTING (AND /OR OBTAINING COPIES OF) ANY NEW MEXICO ARREST FINGERPRINT CARD SUPPORTED ARREST RECORD INFORMATION MAINTAINED BY THE DEPARTMENT OF PUBLIC SAFETY, INCLUDING INFORMATION CONCERNING FELONY OR MISDEMEANOR ARRESTS AND INFORMATION OBTAINED FROM RELEVANT FINGERPRINT DATABASES.

TO THE CUSTODIAN OF THE RECORDS IN QUESTION, I HEREBY DIRECT YOU TO RELEASE SUCH INFORMATION TO THE AUTHORIZED AGENT AS DESCRIBED ABOVE.

I HEREBY RELEASE THE CUSTODIAN OR CUSTODIANS OF SUCH RECORDS AND THE DEPARTMENT OF PUBLIC SAFETY, INCLUDING ANY OF THEIR AGENTS, EMPLOYEES, OR REPRESENTATIVES IN ANY CAPACITY, FROM ANY AND ALL CLAIMS OF LIABILITY OR DAMAGE OF WHATEVER KIND OR NATURE, WHICH AT ANY TIME COULD RESULT TO ME, MY HEIRS, ASSIGNS, ASSOCIATES, PERSONAL REPRESENTATIVE OR REPRESENTATIVES OF ANY NATURE BECAUSE OF COMPLIANCE BY SAID CUSTODIAN OR CUSTODIANS WITH THIS "AUTHORIZATION FOR RELEASE OF INFORMATION" AND MY REQUEST CONTAINED HEREIN FOR THIS RELEASE OR BECAUSE OF ANY USE OF THESE RECORDS. THIS RELEASE IS BINDING, NOW AND IN THE FUTURE AND IS VALID FOR A PERIOD OF UP TO 120 DAYS FROM THE DATE SIGNED, ON MY HEIRS, ASSIGNS, ASSOCIATES, PERSONAL REPRESENTATIVE OR REPRESENTATIVES OF ANY NATURE.

APPLICANT SIGNATURE: _____

DATE: _____

SIGNED AND SWORN TO BEFORE ME ON THIS _____ Day Of _____ 20____

State of _____ County of _____

(SEAL)

(SIGNATURE OF NOTARY PUBLIC)

MY COMMISSION EXPIRES: _____

For Department of Public Safety Use Only



Sign and date with notary present

Notary services are no longer available at the
Concealed Carry Unit office

Student Renewal Application Documents

Application Requirements for a License [NMSA 1978 29-19-6, NMAC 10.8.2.17]

2-page application completed and signed

Photocopy of valid driver's license or ID

Certification of Completion Training Certificate*

Application Fee* \$75.00 fee



Non-Civilian Additional Documents Needed

Veterans:

MUST submit DD-214 with character of discharge section

MUST have Honorable Discharge – no other type qualifies

Others forms *accepted* are: Letter from VA stating Honorable Discharge, or certificate showing Honorable Discharge.

Not accepted forms: Veteran on NMDL or VA card.

Active Duty:

MUST submit Permanent Change of Station (PCS) documents and a copy of their Military ID



Non-Civilian Additional Documents Needed

Law Enforcement Officer:

MUST submit agency ID, Law Enforcement Certification Number, Last Qualification, and Letter of Good Standing

Retired Law Enforcement Officer:

MUST submit Law Enforcement Certification Number, and Letter of Good Standing, Last Qualification AND MUST have completed a minimum of 15 years as a certified LEO unless retired due to job related disability



Replacement License: [NMAC 10.8.2.19]

A. Changes to your name or address: A licensee who changes his or her name, address or law enforcement status shall file within **30 days**:

- (1) an application for a replacement license on the form prescribed by the department;
- (2) if applicable, a certified copy of a legal document proving the change of name;
- (3) a nonrefundable \$10 processing fee; and
- (4) if applicable, proof of reemployment with a law enforcement agency.

B. Loss, theft, or destruction of license: A licensee who loses his or her license or whose license is stolen or destroyed shall file a police report within **10 days** of the date the licensee discovers the loss, theft, or destruction of the license. The licensee shall not carry a concealed handgun until he or she obtains a replacement license. A licensee who seeks to replace a license that is lost, stolen, or destroyed shall file with the department :

- (1) an application for a replacement license on the form prescribed by the department;
- (2) the case number of the police report;
- (3) a notarized statement made under oath that the license was lost, stolen, or destroyed; and
- (4) a nonrefundable \$10 processing fee.

The department shall issue a replacement license within 10 days of receipt of the application



Replacement Card Application

FOLLOW THE CHECKLIST BELOW FOR YOUR APPROPRIATE CATEGORY BEFORE SUBMITTING YOUR REPLACEMENT CARD APPLICATION TO THE DEPARTMENT

INCOMPLETE REPLACEMENT CARD APPLICATIONS WILL NOT BE ACCEPTED

Documents needed for a **Lost License**

- ☐ Replacement Card Application
- ☐ Sworn notarized statement about lost license
- ☐ \$10.00 Fee

Documents needed for a **Stolen License**

- ☐ Replacement Card Application
- ☐ Sworn notarized statement about stolen license
OR copy of police report
- ☐ \$10.00 Fee

Documents needed for a **Destroyed License**

License needs to be returned

- ☐ Replacement Card Application
- ☐ Sworn notarized statement about destroyed License
- ☐ \$10.00 Fee

Documents needed for a **Change of Address**

License needs to be returned

- ☐ Replacement Card Application
- ☐ Proof of address change (utility bill, lease, etc.)
- ☐ \$10.00 Fee

Documents needed for a **Change of Name**

License needs to be returned

- ☐ Replacement Card Application
- ☐ Name change documents
- ☐ \$10.00 Fee

Documents needed for an **Endorsement**

License needs to be returned

- ☐ Replacement Card Application
- ☐ Certificate of Completion
from DPS-Approved Instructor
- ☐ \$10.00 Fee

New Mexico Department of Public Safety

CONCEALED HANDGUN LICENSE REPLACEMENT CARD APPLICATION

TYPE or PRINT LEGIBLY IN INK.

Your application will not be processed unless all application questions have been answered and all required documents have been submitted. FOR ANY LICENSE CHANGES, THE CURRENT CARD MUST BE SURRENDERED WITH APPLICATION AND \$10.00 FEE. See NMAC 10.8.2.18 and NMAC 10.8.2.19(A)(4).

FEES ARE NON-REFUNDABLE

10.8.2.19 REPLACEMENT LICENSE:

A. Change of name address, or status: A licensee who changes his or her name, address or law enforcement status shall file within 30 days:

- 1) an application for a replacement license on the form prescribed by the department;
- 2) if applicable, a certified copy of a legal document proving the change of name;
- 3) a nonrefundable \$10 processing fee; and
- 4) if applicable, proof of reemployment with a law enforcement agency.

B. Loss, theft, or destruction of license: A licensee who loses his or her license or whose license is stolen or destroyed shall file a police report within 10 days of the date the licensee discovers the loss, theft, or destruction of the license. The licensee shall not carry a concealed handgun until he or she obtains a replacement license. A licensee who seeks to replace a license that is lost, stolen, or destroyed shall file with the department:

- 1) an application for a replacement license on the form prescribed by the department;
- 2) the case number of the police report;
- 3) a notarized statement made under oath that the license was lost, stolen or destroyed; and
- 4) a nonrefundable \$10 processing fee.

The department shall issue a replacement license within 10 days of receipt of the application.

[10.8.2.19 NMAC - Rp, 10.8.2.19 NMAC, 11-30-16]

FOLLOW THE CHECKLIST BELOW FOR YOUR APPROPRIATE CATEGORY BEFORE SUBMITTING YOUR REPLACEMENT CARD APPLICATION TO THE DEPARTMENT

INCOMPLETE REPLACEMENT CARD APPLICATIONS WILL NOT BE ACCEPTED

Documents needed for a **Lost License**

- ☐ Replacement Card Application
- ☐ Sworn notarized statement about lost license
- ☐ \$10.00 Fee

Documents needed for a **Stolen License**

- ☐ Replacement Card Application
- ☐ Sworn notarized statement about stolen license
OR copy of police report
- ☐ \$10.00 Fee

Documents needed for a **Destroyed License**

License needs to be returned

- ☐ Replacement Card Application
- ☐ Sworn notarized statement about destroyed License
- ☐ \$10.00 Fee

Documents needed for a **Change of Address**

License needs to be returned

- ☐ Replacement Card Application
- ☐ Proof of address change (utility bill, lease, etc.)
- ☐ \$10.00 Fee

Documents needed for a **Change of Name**

License needs to be returned

- ☐ Replacement Card Application
- ☐ Name change documents
- ☐ \$10.00 Fee

Documents needed for an **Endorsement**

License needs to be returned

- ☐ Replacement Card Application
- ☐ Certificate of Completion
from DPS-Approved Instructor
- ☐ \$10.00 Fee

Replacement Card Application

How long do license holders have to notify the department of a lost/stolen license?

How long do license holders have to notify the department of a change of address?

New Mexico Department of Public Safety									
CONCEALED HANDGUN LICENSE REPLACEMENT CARD APPLICATION									
TYPE or PRINT LEGIBLY IN INK.									
Your application will not be processed unless all application questions have been answered and all required documents have been submitted. FOR ANY LICENSE CHANGES, THE CURRENT CARD MUST BE SURRENDERED WITH APPLICATION AND \$10.00 FEE. See NMAC 10.8.2.18 and NMAC 10.8.2.19(A)(4).									
FEES ARE NON-REFUNDABLE									
<input type="checkbox"/> Change of Address <input type="checkbox"/> Change of Name <input type="checkbox"/> Lost / Stolen / Destroyed <input type="checkbox"/> Add Endorsement <input type="checkbox"/> Other _____									
Last Name:		First Name:			Middle Name:				
Social Security Number:		County of Residence:		NM Driver's License Number:			NMDL Issue Date:		
Date of Birth: (mm-dd-yyyy)		Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Height:	Weight:	Eye Color:	Hair Color:	Race:		
City of Birth:		State of Birth:			Country of Birth other than USA:				
Mailing Address:				City:		State:	Zip Code:		
Physical Address (if different than above):				City:		State:	Zip Code:		
How long have you lived at the above address? Years Months			Home Phone Number:			Business Phone Number:			
Email Address:									
FOR OFFICE USE ONLY:									
Form of Payment: <input type="checkbox"/> Money Order <input type="checkbox"/> Cashier's Check <input type="checkbox"/> Personal Check # _____ <input type="checkbox"/> Credit Card									
The Department of Public Safety acknowledges that on _____ the sum of \$ _____ was received by:									
_____ Signature of employee accepting application					_____ Printed name of employee accepting application				
WARNING: Submission of a false answer to any question or submission of a materially false document will result in the denial of the application and may result in criminal prosecution for perjury (NMSA 30-25-1). Tampering with public records may result in criminal prosecution under NMSA 30-26-1.									
I HEREBY STATE UNDER PENALTY OF LAW THAT:									
<ol style="list-style-type: none">1. I have read the New Mexico Concealed Handgun Carry Act of 2003 and qualify to apply for a concealed handgun license;2. I have been furnished with a copy of the state laws relating to concealed handguns and have read and understand them;3. I want a permit to carry a concealed handgun for lawful purposes, which may include self-defense;4. The information in this application and any documents submitted in this application is true, correct, and complete to the best of my knowledge and belief; and5. I understand a license eligibility investigation will be conducted as a part of the application process; this may involve, but is not limited to, computerized record searches/ criminal history searches and I authorize the investigation.									
_____ Signature of Applicant			_____ Printed Name			_____ Date			



Student Application

Drop off or mail:
New Mexico Department of Public Safety
Concealed Handgun Unit
6301 Indian School Road NE Suite 310
Albuquerque, NM 87110



Remind your students
DO NOT MAIL CASH!!!



Instructor Responsibilities

1. If the department finds that the instructor applicant meets the requirements specified in Subsection B of this section, the department shall issue a concealed carry weapon instructor permit that shall be valid for four years. NMAC 10.8.2.22
2. Every instructor of an approved firearms training course shall annually file a copy of the course description, proof of liability insurance and proof of current instructor certification (USCCA, NRA, DPS LEA) with the department. NMSA 1978 29-19-7 § (2003)(B)
3. All New Mexico Approved instructors shall receive a minimum of eight hours of training biennially. NMAC 10.8.2.25

Biennial training does not renew your instructor certification.



Responsibility of Approved Instructors

[NMAC 10.8.2.24]

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____

- A. Minimum standards for instruction**
CORE and DPS approval –Standardized Curriculum
- B. Minimum standards for firing range instruction**
- C. Guest instructors**
- D. Monitoring by the department**
- E. After action reports (AAR)**
- F. Records**



Core Instruction – [NMSA 1978 29-19-7 § (2003)(A)]

29-19-7. Demonstration of ability and knowledge; course requirement; proprietary interest; exemptions.

The department shall prepare and publish minimum standards for approved firearms training courses that teach competency with handguns. A firearms training course shall include classroom instruction and range instruction and an actual demonstration by the applicant of his ability to safely use a handgun. An applicant shall not be licensed unless he demonstrates, at a minimum, his ability to use a **handgun of .32 caliber**. An approved firearms training course shall be a course that is certified or sponsored by a federal or state law enforcement agency, a college, a firearms training school or a nationally recognized organization, approved by the department, that customarily offers firearms training. The firearms training course shall be not less than fifteen hours in length and shall provide instruction regarding:



Cont... Core Instruction – [NMSA 1978 29-19-7 § (2003)(A)]

- (1) knowledge of and safe handling of single- and double-action revolvers and semiautomatic handguns;
- (2) safe storage of handguns and child safety;
- (3) safe handgun shooting fundamentals;
- (4) live shooting of a handgun on a firing range;
- (5) identification of ways to develop and maintain handgun shooting skills;
- (6) federal, state and local criminal and civil laws pertaining to the purchase, ownership, transportation, use and possession of handguns;
- (7) techniques for avoiding a criminal attack and how to control a violent confrontation;
- (8) techniques for non-violent dispute resolution



Minimum Standards for instruction [NMAC 10.8.2.24(A)]

An approved instructor shall:

- (1) engage as instructors only those persons who have been issued a permit by the department, except as provided in Subsection C;
- (2) have no more students in the classroom or on an indoor firing range than the maximum occupancy allowed by the state or local fire code;
- (3) use classroom facilities that comply with all federal, state, and local laws relating to persons with disabilities, public health, safety, and sanitation, including restroom facilities;



Cont... Minimum Standards for instruction [NMAC 10.8.2.24(A)]

- (4) use only the curriculum, course materials, handouts, and videos approved by the department;
- (5) display the permit issued by the department in an appropriate and visible location;
- (6) not permit a student to begin a firearms training course until the student has received written information stating fees, including incidental costs, charged for the course, policies for passing and failing, refund and reschedule policies, and attendance requirements.



Minimum standards for firing range instruction [NMAC 10.8.2.24(B)]

An approved instructor shall:

- (1) not allow a student to participate in firing range instruction until the student has completed the classroom portion of the firearms training course that covers safe handgun shooting fundamentals;
- (2) conduct firing range instruction under various light conditions when possible;
- (3) have no more students firing a handgun on the firing range than the instructor can effectively and safely instruct and monitor, including no more than **five** students per instructor during daylight training, no more than **three** students per instructor for lowlight training, and no more than one student per instructor for dynamic training such as shooting on the move.



Range Qualification



25 rounds total at a 12" × 18" paper (maximum)

15 rounds at 3 yards

10 rounds at 7 yards

4 points for each shot that hits the paper
must receive a minimum 72% to pass

Daylight: 5 Students 1 Instructor

Lowlight: 3 Students 1 Instructor

On the line? Or total?



Guest Instructors [NMAC 10.8.2.24(C)]

- (1) An approved instructor may use guest instructors who are on the department approved instructor list to teach various parts of a firearm training course, but only with written approval of the department. An approved instructor must file a request for approval to use a guest instructor at least **10 days prior** to the date the guest instructor will teach for the first time. The department will conduct background investigations of guest instructors.
- (2) no guest instructor shall teach the approved instructor's entire firearms 10.8.2.24 NMAC 10.8.2.26 15 training course.
- (3) an approved instructor shall maintain a file on each guest instructor who teaches any portion of the firearms training course. The file shall include a list of the dates and portions of the course each guest instructor has taught, and appropriate documents showing the educations, experience, licenses or certifications that qualify the guest instructor to teach the portions of the course he or she has taught.



LET'S DISCUSS...

How long do you have to inform the department of a guest instructor?

10 DAYS

This gives the department time to process background check

Department needs **NAME, DATE OF BIRTH, AND SOCIAL SECURITY NUMBER**
OR NAME AND CCW PERMIT NUMBER

Once they are approved by the department, they are approved for 1 year

Keep in mind

Guest instructors will not teach the entire course.

You will keep track on when your guest teaches or assists on the range,
and what portions were assisted by guest instructor.



Monitoring by the department [NMAC 10.8.2.24(D)]

The department may monitor all aspects of firearms training courses. Approved instructors shall cooperate with department employees in its efforts to monitor the training of applicants.

- (1) Should a department employee determine that an instructor is not compliant with these rules or is placing his or her students in danger, the employee shall obtain the approved instructor's permit, make a written report and submit both to the secretary. The approved instructor may then file an appeal pursuant to the act and these rules.
- (2) Failure to adhere to any provisions of Subsection D, these rules, or the act shall be grounds for temporary or permanent loss of an instructor's permit.



Instructor Self Audit Questionnaire

In accordance with NMAC 10.8.2.24(D): The department may monitor all aspects of firearms training courses. Approved instructors shall cooperate with department employees in its efforts to monitor the training of applicants.

Please complete and return this document to the Department of Public Safety within 15 days of receipt.

Name: _____ Instructor # _____
Email: _____
Mailing Address: _____
Phone Number: _____

Information to be displayed on NM DPS Website (if different than above)

Email _____
Phone number _____
Website address _____

1. Have you ever been audited? If yes, by whom and when?
2. How and where are your records stored NMAC 10.8.2.24(F)? Do you destroy them when the five-year requirement is over? If so, how do you destroy them?
3. Who has access to your concealed carry training records?
4. What is your current DPS Instructor Permit expiration date NMAC 10.8.2.22(D)(1)(a)?
 - a. Do you have a copy of your most recent DPS approval letter and certificate?
 - b. How do you display your certificate during your training classes NMAC 10.8.2.24(A)(5)?
5. When was your last annual submission of your course NMAC 10.8.2.22(D)(1)(b)?
6. When was your last annual submission of your instructor credentials and Instructor Liability Insurance NMAC 10.8.2.22(B)(5)?
7. Are your instructor credentials (NRA, DPS, USCCA, etc.) current? Include agency, instructor # with agency, and expiration.
8. Do you have any guest instructors, range safety officers that are not employed by a range, and/or admins?
 - a. If you do, how many?
 - b. Have they all been background checked in the last year (12 months)? (circle one)

YES NO If no, please explain
 - c. If no, who are they (Name, DOB, SSN/or CCW permit number)?
 - d. If yes, please list the names approved to confirm records.
9. How are your classes scheduled? If you have a website, is the information available there? If they are not available on a website, email your class schedule to NMCC.Instructors@state.nm.us.
10. How many hours do you spend in the classroom for your Initial License class?



11. How many hours do you spend on the range for any class?
12. Describe your firing range procedure, including number of students on the firing line, number of rounds students are required to fire, size of target, and distance of target from shooter. Please also include any dry fire exercises or practice rotations that are a part of your class.
13. What considerations do you utilize to determine a student's competency to continue to the live-fire section of your class? What additional student qualifications other than range competency demonstration as specified in NMAC 10.8.2.15(B) help you determine whether a student is issued a training certificate indicating your assessment of a student's proficiency?
14. Have you ever denied a training certificate to a student? If so, what were your justifications for doing so?
15. If you have ejected a student from class or denied a student a training certificate, do you note that anomaly on your DPS-submitted class AAR?
16. Have you already attended or are scheduled to attend one of the DPS-sponsored Instructor In-Service Training classes NMAC 10.8.2.25? If so, which class and have you RSVP'd?
17. During your past year as a DPS-approved concealed carry instructor, what personal training related educational courses or other activities have you led or participated in to maintain and enhance your personal knowledge and skills? Please list any of your most significant examples.

Please return this completed form to:

Department of Public Safety Concealed Carry Unit
Attn: Instructor Audit
6301 Indian School Road NE, Suite
310 Albuquerque, NM 87110
-or-
email: NMCC.Instructors@state.nm.us

Self-Audit Example



<https://www.surveymonkey.com/r/instructoraudit2022>



Student Questionnaire for Concealed Carry Class

Thank you for taking the time to complete this NM DPS concealed carry class questionnaire. This survey is anonymous unless you request to be contacted. If you request to be contacted, please leave your name and contact number at the bottom of this form for further assistance from the department.

Instructor Name and Number: _____

Course Date(s): _____ Course location: _____

1. Why did you take this class? _____

2. What part of the class did you enjoy most? _____

3. What part of the class did you enjoy least? _____

4. What could be improved? _____

YES NO

5. Did instructor(s) keep control of the class?	<input type="radio"/>	<input type="radio"/>
6. Do you feel your class has left you confident in carrying a concealed weapon?	<input type="radio"/>	<input type="radio"/>
7. Do you feel confident in the knowledge of State, Federal, local criminal and civil laws concerning carrying a concealed weapon?	<input type="radio"/>	<input type="radio"/>
8. Has your knowledge of safe handling of single and double action revolvers and semiautomatic handguns improved after taking this course?	<input type="radio"/>	<input type="radio"/>
9. Are you better informed in the safe storage of your handgun and child safety?	<input type="radio"/>	<input type="radio"/>
10. Do you feel the instructor(s) has given substantial training for techniques for non-violent dispute resolutions and techniques for avoiding criminal attacks?	<input type="radio"/>	<input type="radio"/>
11. Do you feel this course left you comfortable in your knowledge of shooting fundamentals and the shooting your firearm?	<input type="radio"/>	<input type="radio"/>
12. Did you get a copy of the NM Concealed Carry Act? (Virtual or Physical)	<input type="radio"/>	<input type="radio"/>
13. Did the class begin and end on time?	<input type="radio"/>	<input type="radio"/>
14. Was/Were the instructor(s) fair? If not, please comment.	<input type="radio"/>	<input type="radio"/>
15. Did the instructor(s) encourage questions/participation?	<input type="radio"/>	<input type="radio"/>
16. Would you like the department to contact you regarding this survey?	<input type="radio"/>	<input type="radio"/>

Name: _____

Phone number: _____

Questionnaire may be submitted to:
NMDPS Concealed Carry Unit, 6301 Indian School Rd NE Suite 310, Albuquerque, NM 87110
OR
NMCC.Instructors@dps.nm.gov

Student Audit Example



LET'S DISCUSS...

What does this mean?

You may be audited and/or monitored with or without warning.

What does this look like?

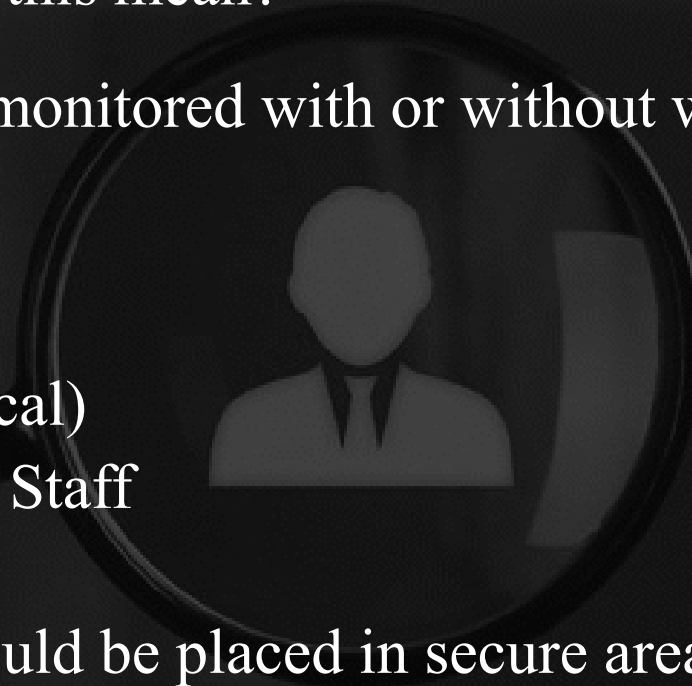
Self-Audit Questionnaire (Online or Physical)

Monitoring of course and range by CCU Staff

Student Audits (Online or Physical)

Audit of CCU Instructor Documents should be placed in secure area.

Complaints handled on a case-by-case basis



A grayscale photograph of a person in a suit sitting at a desk, writing on a document with a pen. The person's hands and the pen are in focus, while the rest of the person and the background are blurred.

ACCURATE
PAPERWORK
IS IMPORTANT!



After Action Reports (AAR) [NMAC 10.8.2.24(E)]

An approved instructor shall file the following information with the department within 10 working days after the end of each firearms training course on the form prescribed by the department:

- (1) the **name, address, and date of birth** of each applicant who attended the course;
- (2) the **score** (percentage) each applicant achieved in the handgun competency demonstration;
- (3) the **category and highest caliber of each handgun** for which the applicant demonstrated competency; and
- (4) whether or not the approved instructor issued a certificate of completion and each category and caliber for which the certificate was issued.



Department-Prescribed Forms [NMAC 10.8.2.10]

- A. Use required.** The department has prescribed forms to carry out certain requirements of this rule. The most current version of a department form must be used when a form exists for that purpose, unless the department waives this requirement.
- B. How to obtain.** Department-prescribed forms may be obtained from the department's website at

<https://www.dps.nm.gov/top-links-for-nm-residents/concealed-carry-licenses>

[10.8.2.10 NMAC - Rp, 10.8.2.10 NMAC, 11-30-16]

OR you can request a form by sending an email to
NMCC.Instructors@dps.nm.gov



New Mexico Department of Public Safety
Concealed Carry After Action Report

DPS Approved Instructor Number: _____ Page: _____ of _____
Printed Name of Instructor: _____ New Mexico Concealed Handgun Class-Report# _____
Signature of Instructor: _____ Course Date: _____
Course Location: _____

Seq. #	Name:	Address:	Date of Birth	Semi-Auto	Score	Non-Semi	Score	Additional Data

Date Submitted: _____ Date Received: _____

This Form must be completed (Typed or Printed Clearly) by the Instructor.

This Form must be submitted within ten (10) working days after the end of each firearms training course.

WARNING: Submission of a false answer to any question or submission of a materially false document will result in the denial of the application and may result in criminal prosecution for perjury (NMSA 30-25-1). Tampering with public records may result in criminal prosecution under NMSA 30-26-1.

Revised 08/20/2019

First, make sure you are
using the right form.

How do you know?
(Revised 8/20/2019)



Acceptable signatures

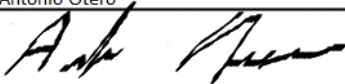
//Your Name// Example: //Antonio Otero// If you choose to sign this way you **MUST** have a copy of the document with a signature in your records

Signature of Instructor: //Antonio Otero//

Digital Signature Example: This option is only available in PDF versions

Signature of Instructor: Antonio Otero Digitally signed by Antonio Otero
Date: 2019.01.23 10:18:01 -07'00'

Actual Signature Example: Must include signature (physical or digital)

DPS Approved Primary Instructor Number:	330
Type or Print Name of Primary Instructor:	Antonio Otero
Signature of Instructor:	
Date Signed:	1-1-2019



New Mexico Department of Public Safety

Concealed Carry After Action Report

DPS Approved Instructor Number: **330** Page: 1 of 1

Printed Name of Instructor: **Antonio Otero** New Mexico Concealed Handgun Class-Report#

Signature of Instructor: //AntonioOtero//

Course Location: Albuquerque

[illegible]

Date Submitted: 09/12/2022

Date Received: _____

This Form must be completed (Typed or Printed Clearly) by the Instructor.

This Form must be submitted within ten (10) working days after the end of each firearms training course.

WARNING: Submission of a false answer to any question or submission of a materially false document will result in the denial of the application and may result in criminal prosecution for perjury (NMSA 30-25-1). Tampering with public records may result in criminal prosecution under NMSA 30-26-1. Revised 08/20/2019

Revised 08/20/2019

ACCEPTABLE EXAMPLE

with
//AntonioOtero//
signature



New Mexico Department of Public Safety
Concealed Carry After Action Report

DPS Approved Instructor Number: 330 Page: 1 of 1

Printed Name of Instructor: Antonio Otero New Mexico Concealed Handgun Class-Report# 1

Signature of Instructor: Antonio Otero Course Date: _____

Seq. #	Name:	Address:	Date of Birth	Semi-Auto	Score	Non-Semi	Score	Additional Data
001	Doc Brown	1640 Riverside Drive Hill Valley, CA 95420	10-22-1938	.32	82%	.38	88%	
002	Buffy Summers	1630 Revello Drive Sunnydale, CA 94043	1-19-1981	.45	100%	.38	100%	
003	Sam Malone	84 Beacon Street Boston, MA 02101	12-29-1947	.45	100%	.50	100%	
004	Peter Griffin	31 Spooner Street Quahog, Rhode Island 00110	7-22-1955	.40	96%	.32	100%	

Date Submitted: 1-5-2019

Date Received: _____

This Form must be completed (Typed or Printed Clearly) by the Instructor.

This Form must be submitted within ten (10) working days after the end of each firearms training course.

WARNING: Submission of a false answer to any question or submission of a materially false document will result in the denial of the application and may result in criminal prosecution for perjury (NMSA 30-25-1). Tampering with public records may result in criminal prosecution under NMSA 30-26-1.

Revised 08/20/2019

**NOT
ACCEPTABLE
EXAMPLE**

Antonio Otero





**NEW MEXICO
DEPARTMENT OF PUBLIC SAFETY
CONCEALED CARRY UNIT**

**CERTIFICATE OF SUCCESSFUL COMPLETION OF
NEW MEXICO CONCEALED HANDGUN TRAINING COURSE**

Regular/Initial 15-hour NM CCW Course	<input type="checkbox"/>
4-Year Renewal Course	<input type="checkbox"/>
2-Year Refresher Course	<input type="checkbox"/>
Endorsement	<input type="checkbox"/>


This is to certify that:

Has completed the approved State of New Mexico Firearms Course as indicated above, as specified in Subsection A of NMSA, 1978, Section 29-19-7, and demonstrated Handgun Competency and/or as specified in Firearms Training for Applicants and Licensees 10.8.2.15.A.(2), NMAC

Semi-Auto Firearm Information		Non-Semi-Auto Firearm Information	
Caliber:		Caliber:	
Score:		Score:	

Student Name:		Student ID:	
Street Address:		Date Course Completed:	
City, State, Zip:		Training Location:	
Date of Birth:		Hours of Training Completed:	

Instructor Information:

DPS Approved Primary Instructor Number:	
Type or Print Name of Primary Instructor:	
Signature of Instructor:	
Date Signed:	

This form must be completed (Typed or Printed Clearly) by the instructor. This form must be submitted with the initial, or renewal application for a Concealed Handgun Carry Permit, or as proof of 2-Year Refresher Training. **This form expires 90 days from Course Completion date.**



First, make sure you are
using the right form.

How do you know?
(Revised 8/20/2019)





NEW MEXICO
DEPARTMENT OF PUBLIC SAFETY
CONCEALED CARRY UNIT

CERTIFICATE OF SUCCESSFUL COMPLETION OF
NEW MEXICO CONCEALED HANDGUN TRAINING COURSE

Regular/Initial 15-hour NM CCW Course	<input checked="" type="checkbox"/>
4-Year Renewal Course	<input type="checkbox"/>
2-Year Refresher Course	<input type="checkbox"/>
Endorsement	<input type="checkbox"/>

This is to certify that:

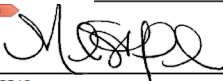
John Smith

Has completed the approved State of New Mexico Firearms Course as indicated above, as specified in Subsection A of NMSA, 1978, Section 29-19-7, and demonstrated Handgun Competency and/or as specified in Firearms Training for Applicants and Licensees 10.8.2.15.A.(2), NMAC

Semi-Auto Firearm Information	Non-Semi-Auto Firearm Information
Caliber: .45	Caliber: n/a
Score: 100%	Score: n/a

Student Name:	John Smith	Student ID:	12345
Street Address:	123 1st Street	Date Course Completed:	1-1-2019
City, State, Zip:	Albuquerque, NM 87000	Training Location:	Albuquerque
Date of Birth:	1-1-1975	Hours of Training Completed:	15 hours

Instructor Information:

DPS Approved Primary Instructor Number:	330
Type or Print Name of Primary Instructor:	Antonio Otero
Signature of Instructor:	
Date Signed:	1-1-2019

This form must be completed (Typed or Printed Clearly) by the instructor. This form must be submitted with the initial, or renewal application for a Concealed Handgun Carry Permit, or as proof of 2-Year Refresher Training. This form expires 90 days from Course Completion date.

ACCEPTABLE
EXAMPLE
with
actual signature





**NEW MEXICO
DEPARTMENT OF PUBLIC SAFETY
CONCEALED CARRY UNIT**

**CERTIFICATE OF SUCCESSFUL COMPLETION OF
NEW MEXICO CONCEALED HANDGUN TRAINING COURSE**

Regular/Initial 15-hour NM CCW Course	<input checked="" type="checkbox"/>
4-Year Renewal Course	<input type="checkbox"/>
2-Year Refresher Course	<input type="checkbox"/>
Endorsement	<input type="checkbox"/>

This is to certify that:

John Smith

Has completed the approved State of New Mexico Firearms Course as indicated above, as specified in Subsection A of NMSA, 1978, Section 29-19-7, and demonstrated Handgun Competency and/or as specified in Firearms Training for Applicants and Licensees 10.8.2.15.A.(2), NMAC

Semi-Auto Firearm Information	Non-Semi-Auto Firearm Information
Caliber: .45	Caliber:
Score: 100%	Score:

Student Name:	John Smith	Student ID:	12345
Street Address:	123 1st Street	Date Course Completed:	1-1-2019
City, State, Zip:	Albuquerque, NM 87000	Training Location:	Mark's Shooting Range
Date of Birth:	1-1-1975	Hours of Training Completed:	

Instructor Information:

DPS Approved Primary Instructor Number:	2000
Type or Print Name of Primary Instructor:	
Signature of Instructor:	
Date Signed:	1-1-2019

This form must be completed (Typed or Printed Clearly) by the instructor. This form must be submitted with the initial, or renewal application for a Concealed Handgun Carry Permit, or as proof of 2-Year Refresher Training. This form expires 90 days from Course Completion date.

**NOT
ACCEPTABLE
EXAMPLE**



Name on Certificate

For renewals and 2-year or midpoint refresher use the name on their CCW license and CCW Permit Number. No nicknames.

Hello. Why?

My name is

It makes it easier for the department to find the correct student and ensures they get credit for the course.



Course Date

There is only **ONE** Course Date

What happens when you have a course that runs over 2 days?

There is still only **ONE** Course Date!

Use the final day, usually the range day, as your course date.

Make sure the date on CERTIFICATES is the same on the AAR!



.38 vs .357

When completing the After Action Report and Certificate of completion be sure to specify whether the student qualified with a .38 or .357.

“.38/.357” will *no longer* be accepted on AAR’s or Certificates

It is important to note that though .38 and .357 have the same diameter even though they are different cartridges.

Can they carry either .38 if the license states .357 and vice versa?

Yes, because the diameters are the same.



Corrections for AAR's

What do you do if you have to make a correction to an already submitted AAR?

Simply send the corrected AAR again, noting that there is a correction to the previous report.

Please do not ask us to change the one we have already received and uploaded.

It is not a burden to upload a corrected AAR.



Required Documents for EACH class taught

After Action Report **AND** Course Completion Certificate needed for:

Initial 15-hour class

Refresher (2-year or midpoint)

Renewal (4-hour every 4 years)

Endorsement



What to do with these Required Documents

Initial 15-hour class

AAR

-Send to DPS CCU

Course Completion Certificate

-Give to student

Refresher (2-years or midpoint)

AAR

-Send to DPS CCU

Course Completion Certificate

-Send to DPS CCU

Renewal (4-hour every 4 years)

AAR

-Send to DPS CCU

Course Completion Certificate

-Give to Student

Endorsement

AAR

-Send to DPS CCU

Course Completion Certificate

-Give to Student

KEEP COPIES FOR YOUR RECORDS!



Common Errors on Form Submission

Date of course and date on Students' Certificate of Completion mismatched

Double check dates before submitting

While team teaching the Instructor number of the AAR is different than the Certificate of Completion.

Add ALL instructors on AAR

Illegible AAR's

There should be no question as to what you are submitting, type when you can.



LET'S DISCUSS...

Why is using the prescribed format important?

Helps the department locate pertinent information quickly.

Why should these official documents be typed or printed clearly?

Prevents delays in processing students' applications.

Why missing data, such as dates, names, addresses, instructor number, etc., causes issues?

Causes delays in processing students' applications.



Where to submit documents



Email:

NMCC.Instructors@dps.nm.gov



Mail:

6301 Indian School Road NE, Suite 310
Albuquerque, NM 87110



Fax:

(505) 841-8062



Ways to store secure records

Least Secure

Filing Cabinet at Home

Your documents are only as safe as the lock on your front door or home security system (if you have one). Also, your documents are susceptible to potential disasters like fires or floods.

Home Safe

If your home safe is bolted down or hidden somewhere a thief can't easily find it, it's very secure.

Most Secure

Online Document Storage

Your legal documents can only be accessed by you or people with whom you have shared your documents. Of course, make sure you select a hard to guess password to protect your documents.

Records [NMAC 10.8.2.24(F)]

An approved instructor shall maintain the records required by this subsection for a period of **five** years from the date of completion of each firearms training course. The records shall be stored in a safe and secure place and shall be available for inspection by the department promptly upon request. An approved instructor shall maintain:

- (1) a record of each handgun competency certificate issued;
- (2) a record of the following information for each course:
 - (a) name, address, and date of birth of each applicant who attended the course
 - (b) the score the applicant achieved in the handgun competency demonstration;
 - (c) the category, and caliber, of each handgun for which the applicant demonstrated competency; and
 - (d) an indication of whether or not the approved instructor issued a certificate of completion to that applicant;



Cont... Records [NMAC 10.8.2.24(F)]

- (3) a record of the dates and number of hours of each firearms training course;
- (4) a record of the curriculum and course materials used in each course;
- (5) copies of documents and correspondence filed with the department.

[10.8.2.24 NMAC – Rp, 10.8.2.24 NMAC, 11-30-16]



Instructor Application

APPLY



Instructor Documentation Required for Initial Approval

Current Instructor Documentation [NMAC 10.8.2.22(B)]

2-page application

Release of Health Information (witnessed)

Release of Information (notarized)

Fingerprinting – digital (Identego)

Certification of Instructor Training (NRA, DPS-LEA, USCCA, etc.)

Proof of Liability Insurance as Instructor

Background / Resume with relevant experience

Photocopy of valid driver's license

Photocopy of birth certificate or passport (if ID isn't a NM Real ID)

Curriculum and course materials to be approved by DPS



Instructor Documentation Required for Renewal

Current Instructor Documentation [NMAC 10.8.2.24(E)]

2-page application

Certification of Instructor Training Updates (NRA, DPS-LEA, USCCA, etc.)

Proof of Liability Insurance as Instructor

Photocopy of valid driver's license

Curriculum and course materials to be approved by DPS



Important Instructor Renewal Information [NMAC 10.8.2.24(E)]

An approved instructor seeking to renew their permit shall file with the department at least 60 days before the date his or her permit expires:

What does this mean?

You are to turn in your renewal information **60 days BEFORE** your permit expires.

There is no grace period for instructor renewals.



What is included in Curriculum and Course Materials?

15 hour

Presentation (example: PowerPoint)

All documents given to students (example: handouts)

Description of all hands-on teaching (example: the disassembly of a handgun)

Fee Schedule given to students (see below)

Responsibilities of Approved Instructors[NMAC 10.8.2.24(A)(6)]

An approved instructor shall:

not permit a student to begin a firearms training course until the student has received written information stating all fees, including incidental costs, charges for the course, policies for passing and failing, refund and reschedule policies, and attendance requirements.



Mel's Shooting Range
45 Caliber Lane NE
Albuquerque, NM 87111
505-555-5555

Concealed Carry Class



New Mexico Concealed Handgun Carry Course

Initial 15-hour cost \$100.00 which includes

- 15 hours of instruction
- Eye protection
- Ear plugs

- 2-year refresher course/qualification

(Participants must bring their own gun or may rent a handgun for \$15.00)

4-year renewal cost \$100.00 which includes

- 4 hours of instruction
- Eye protection
- Ear plugs

- 2-year refresher course/qualification

(Participants must bring their own gun or may rent a handgun for \$15.00)

Range Fee \$7.00 per person

Civilian

The department charges \$ 100 Application Fee .

The department charges \$75.00 for the 4-year renewal.

Military and Law Enforcement

The department charges \$0.00 Application Fee .

The department charges \$0.00 for the 4-year renewal.

Passing requirements

- Must be present for all hours of instruction

- Pass the range qualification with a minimum of 72%

Students will **fail** if they are not present for all hours of instruction, receive a score lower than 72% for the range qualification, and/or fail to use gun safety knowledge learned in classroom on the range.

Fees are non-refundable- Fees can be applied to another class.

Rescheduling is permitted with a 24-hour notice.

Example Fee Schedule Handout

Charges for the course policies
Including incidental costs

All fees (ie: range fees, ammo fees, gun rental fees)

Policies for passing and failing including
attendance requirements

Refund and reschedule policies



Standard Curriculum

Standard Curriculum built by DPS Concealed Carry Unit is available for any instructor to utilize.
This is the **minimum** requirement for curriculum.

<https://drive.google.com/open?id=1GhW-AZabQw9EUsMijGKBD3SF50aELz0R>



LET'S DISCUSS...

What are you required to provide **yearly**?

- Proof of Liability Insurance as Instructor

- Curriculum and course materials to be approved by DPS

- Updated Credentials (when you renew)

- Guest Instructors (if any)

What are you required to provide **every 4 years**? (Permit Renewal)

- 2-page application

- Photocopy of valid driver's license

- Updated Credentials

- Proof of Liability Insurance as Instructor

- Curriculum and course materials to be approved by DPS



Notice of suspension or revocation and surrender of permit

[NMAC 10.8.2.26(B)]

The department shall investigate all allegations concerning grounds for suspension or revocation of permits. If the department finds there is a preponderance of evidence supporting the complaint, and there exists cause to suspend or revoke the permit, the department may issue a notification of suspension or revocation of the permit to the approved instructor and advising the approved instructor of his or her right to a hearing in accordance with 10.8.2.26 NMAC. **If the approved instructor elects not to request a hearing the approved instructor shall surrender his or her permit to the department within 15 days of the expiration of the period for requesting a hearing and shall cease offering firearms training courses pursuant to this rule.**



Suspension and Revocation of an Instructor Permit

[NMAC 10.8.2.26(A)]

Grounds. The department may suspend or revoke a permit if the approved instructor:

- (1) is the subject of valid complaints from applicants, licensees, or other approved instructors;
- (2) violates any of the grounds stated in Subsection A of 10.98.2.21 NMAC with respect to a license;
- (3) violates any provision of the act or these rules; or
- (4) fails to improve after having been sanctioned.



Immediate suspension of firearms training course and refund of tuition NMAC 10.8.2.26(C)(3)

If the department finds, after notice and a hearing, that the person teaching the course was not an approved instructor, was impaired, has committed a misdemeanor or felony under the criminal code, or was teaching something contrary to law or accepted safety practices, the department may order the person to refund every student in the class the person taught, and any fees paid by the student to take the class. If the department finds that all or any portion of the firearms training course was deficient because the instructor was not an approved instructor, was impaired, has committed a misdemeanor or felony under the criminal code, or was teaching something contrary to law or safety, the department may require the students in that class to retake the portions that were deficient. The department may also initiate proceedings to suspend or revoke the approved instructor's permit.



Sanctions and Penalties – will be progressive discipline

First notice: Phone call and/or email to approved instructor to number/email provided.

Second notice: Notice, in writing, of the department's intent to sanction and reason(s) for sanction. The notice will include specific time frame to improve upon or correct action(s) which is/are the subject of the Notice of Intent to Sanction.

Third notice: Notice, in writing of final deadline for improvement or resolution, along with meeting with department.

If no improvement or resolution:

 License suspension or revocation

 Possibility of requesting a hearing



ID's you may encounter

New Mexico Standard License

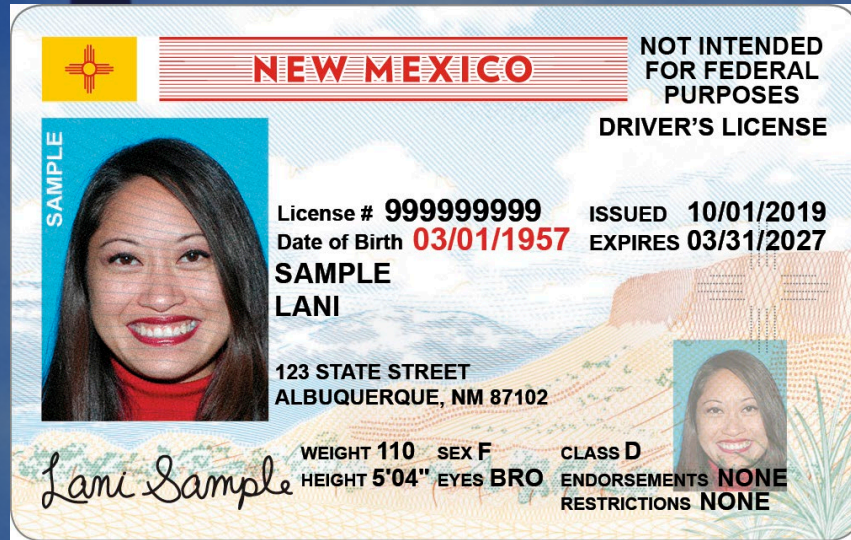
New Mexico Real ID

Permanent U.S. Resident Cards (commonly called Green Cards)



NM Current Driver's License and ID Card Examples

Standard
License

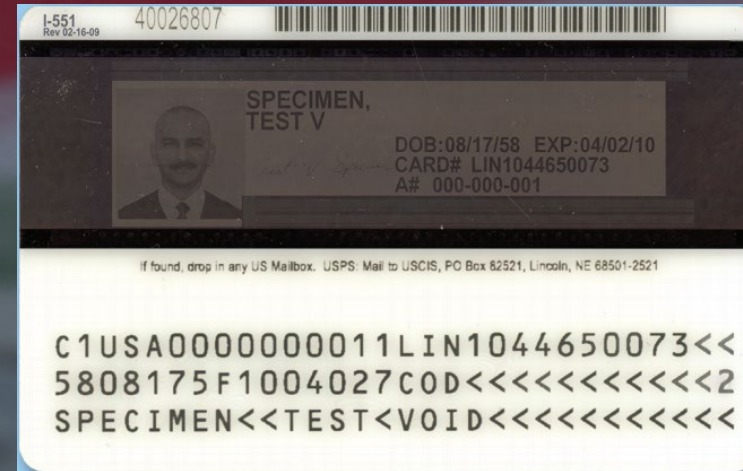
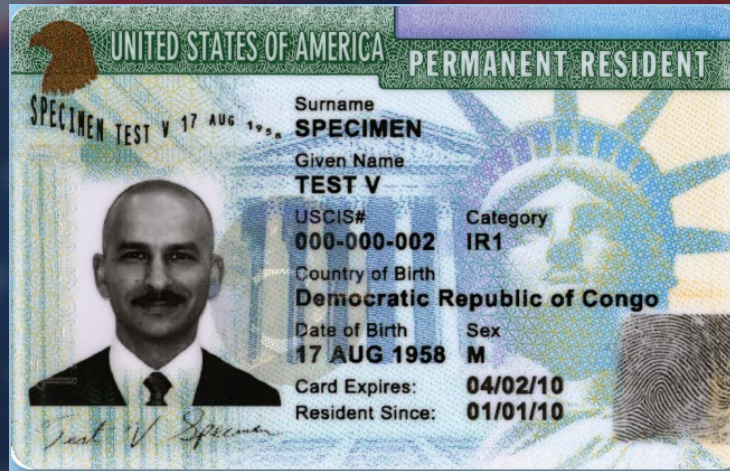


Real ID



Forms of Identification – Verify with DHS / USCIS

Permanent Resident Cards (Form I-551), commonly called Green Cards



Newer
Version
2017



Reciprocity

No reciprocity shall be afforded to a license issued by another state to a New Mexico resident NMAC 10.8.2.29(H)

Possession by an applicant of a driver's license issued by another state shall create a rebuttable presumption of residency in such other state. NMAC 10.8.2.12 (A)(2)

<https://www.dps.nm.gov/reciprocity>



Public Record

Approved active instructor basic
information

(Name, Phone Number, Email Address)

Not Public Record

Applications, in the application process

An individual's possession of a New
Mexico concealed carry license.

Knowledge of possession of a New Mexico concealed carry license is available
to law enforcement for law enforcement purposes.



What about Medical Marijuana Cards?

The state of New Mexico does not report Medical Marijuana Cards for the department to know they have them. The department cannot deny. It is legal to hold both however, it is still illegal to be under the influence.



©FourTw

What about Recreational Use Marijuana?

It is illegal to be under the influence of marijuana while in possession of a firearm.

There is no state statute that prohibits the possession of marijuana and a firearm; however, it is still federally illegal to be in possession of both at the same time.

18 U.S.C. § 922





Fingerprint and Application Fees



Fingerprints are now provided by Idemia (Identogo)

An initial license fee for **civilians** is \$100.00
\$59.00 fee for fingerprints/background check
\$100.00 application fee to DPS
Total = \$159.00

A renewal license fee for **civilians** is \$75.00
\$75 fee to DPS – fingerprints are digitally stored and will
be resubmitted to the FBI and a new background check
will be processed.
Total \$75

If they let their license lapse and need to reapply, they do
not need to be fingerprinted again, however, they do still
pay the \$100.00 fee to DPS.



Idemia (Identogo) and Application Fee for Military/LEO

An **initial** license fee for **military/leo** is \$23 fee for fingerprints/background check
\$0 application fee to DPS

A **renewal** license fee for **military/leo** is \$0

Fingerprints are digitally stored and will be resubmitted to the FBI and a new background check will be processed.

\$0 application fee to DPS



Why is the ORI Important?

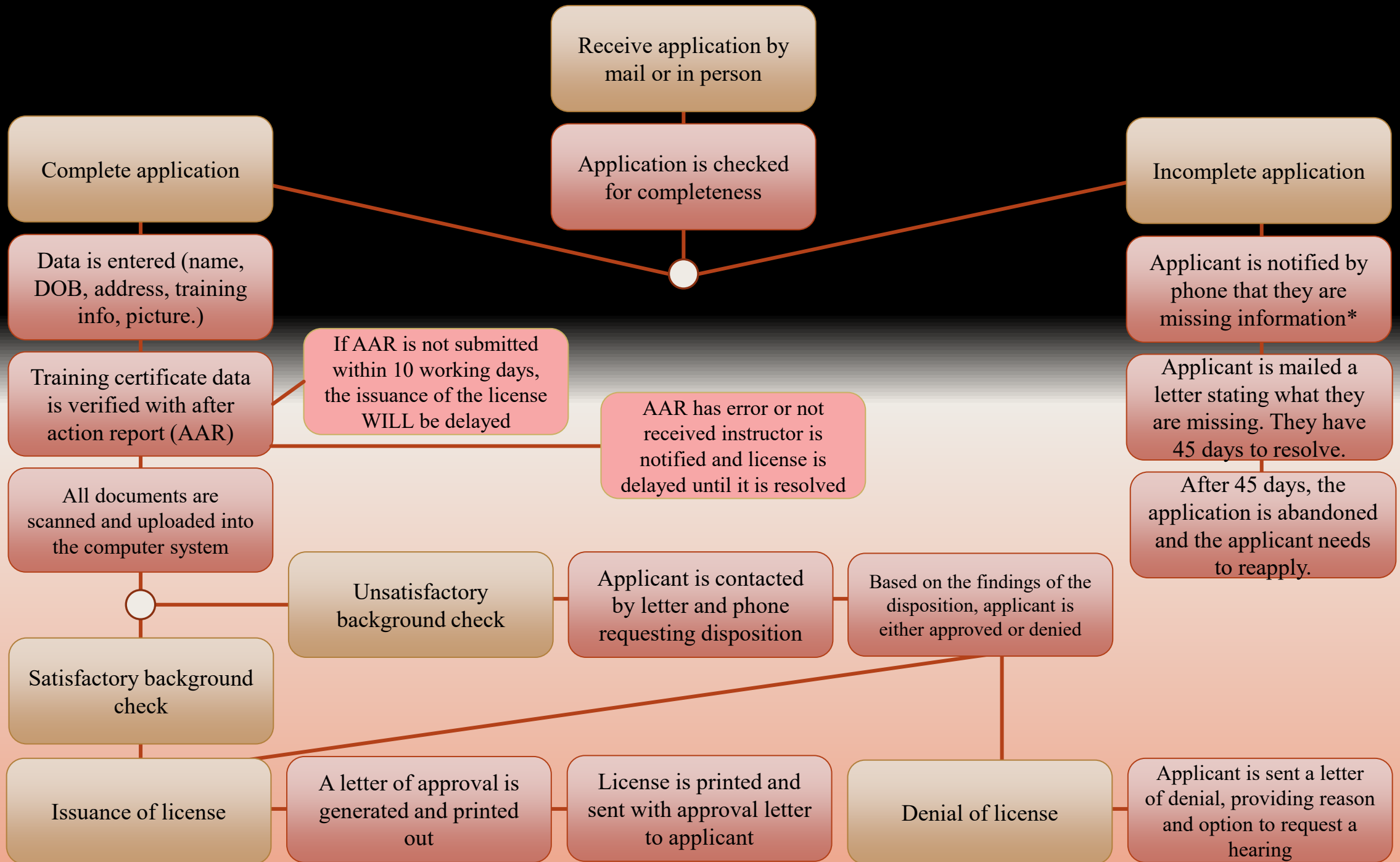
The ORI is the Originating Agency Identification number. This is the number assigned to the Concealed Carry Unit. This is important for Rap Back purposes.

Rap Back is a FBI service that gives the Concealed Carry Unit notifications of activity on individuals who registered with that ORI (License holders or applicants).



The Application Process Explained







Concealed Carry Online Portal


Where to find the online portal?

You can find the link by going to the CCW page of the New Mexico Department of Public Safety Website

<https://www.dps.nm.gov/law-enforcement-records-bureau/concealed-carry-licenses/>

NEW ONLINE PORTAL AVAILABLE FOR CONCEALED CARRY APPLICANTS!

If you have met the requirements for a concealed carry and are ready to submit or you need to replace your current license, then click below.



Submit Application

Where to find the online portal?

You can also use this direct link to take you to the online portal

<https://ccu.dps.nm.gov/ccu-app/login>

Welcome to the New Mexico Conceal Carry Unit Web Portal

Log In

Username

Password

Log In

Create an Account

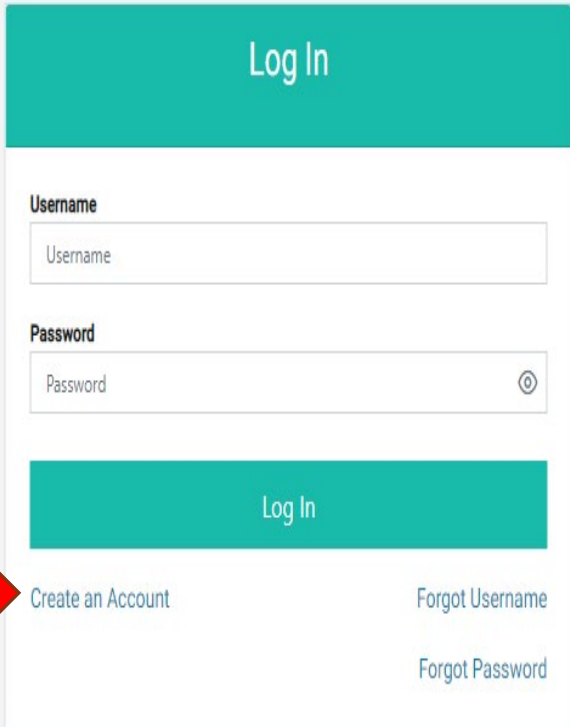
Forgot Username

Forgot Password

Creating Your Account

The first step will be to create an account

- Click the “Create account” link



The image shows a login and registration form. At the top is a teal button labeled "Log In". Below it are two input fields: "Username" and "Password". The "Password" field has a toggle icon on the right. Below the input fields is another teal button labeled "Log In". At the bottom, there are two links: "Create an Account" and "Forgot Username". A large red arrow points from the left towards the "Create an Account" link. Below the "Forgot Username" link is another link labeled "Forgot Password".

Creating Your Account

Fill out all the fields on the form

Your password must contain:

- at least one upper case
- at least one lower case
- at least one digit (0..9)
- should contain at least one Special character (!@#\\\$&*~)
- must be at least 8 characters in length

❖ Make sure to select the license type that applies to you

The license type will determine what documents you need to upload (civilian, military, etc.)

❖ An email verification code will be sent to the email provided

Welcome to the New Mexico Conceal Carry Unit Web Portal

CCW Registration

Clear Form

Username

SteveRogers

Email

CaptainA@hotmail.com

Password

Confirm Password

First Name

Steve

Middle Name

C.

Last Name

Rogers

Suffix

Suffix

Social Security Number

Confirm Social Security Number

Date of Birth

07/04/1942

License Type

License Type

Email me a verification code

Pressing the button above, will send a message to the email address you provided with a code that you will need to enter to authenticate your information and create your account.

Already registered? Click to Login!!

Creating Your Account

Enter verification code from email



Enter verification code

Please check your email for the verification code and enter here.

Code Verification

Create Account

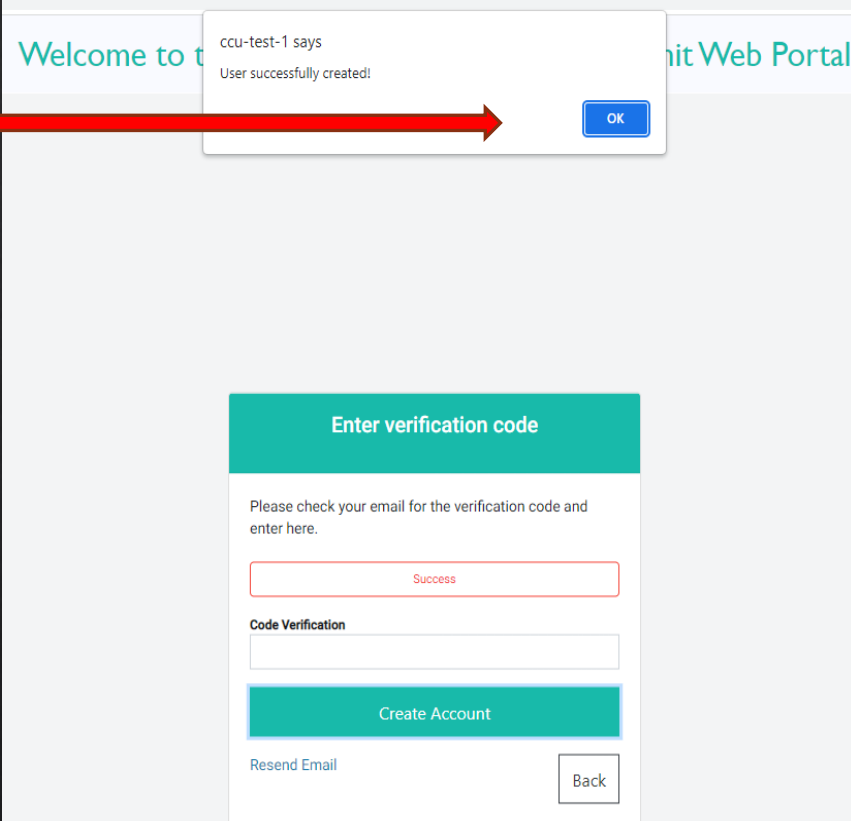
[Resend Email](#)

Back

Creating Your Account

User has been successfully created

Click blue “OK” box to proceed



The screenshot shows a web portal interface. At the top, there is a teal header with the text "Welcome to t" on the left and "nit Web Portal" on the right. A white modal box is centered on the screen, displaying the message "ccu-test-1 says" and "User successfully created!". A blue "OK" button is located in the bottom right corner of the modal. A red arrow points from the text "Click blue “OK” box to proceed" to this button. Below the modal, there is a teal box with the text "Enter verification code". Below this, there is a white box with the text "Please check your email for the verification code and enter here." and a red "Success" message. Below this, there is a "Code Verification" label and a text input field. At the bottom, there is a teal "Create Account" button, a "Resend Email" link, and a "Back" button.

Submitting Your Application

Log into your account with the username and password you just created

Welcome to the New Mexico Conceal Carry Unit Web Portal

Log In

Username

Username

Password

Password

Log In


Create an Account

Forgot Username

Forgot Password

Submitting Your Application

Once you login you will select the green “Apply for CCU License”



Welcome to the New Mexico Conceal Carry Unit Web Portal

[Apply for CCU License >](#)

Personal details

Full Name STEVE C ROGERS	Date of Birth 7/4/1942	Gender	Mailing Address
Contact	Email Address antonio.otero@dps.nm.gov		

License details

No License data

Application details

Application Number 2640423	Application Status ACTIVE	Category CIVILIAN	Received Date
--------------------------------------	-------------------------------------	-----------------------------	----------------------

Submitting Your Application

Select and verify applicant type

Fill in the details and answer questionnaire

Don't forget to upload documents

- ❖ Only upload documents that were requested
- ❖ Any missing or incorrect documentation will result in delays

Welcome to the New Mexico Concealed Carry Web Portal

Create Application

Concealed Handgun License Application

Back

Application Status: **Pending**

☒ Online ☐ Low Enrollment ☐ Writing

Applicant Details

Last Name: [REDACTED] First Name: [REDACTED] Middle Name: [REDACTED] Suffix: [REDACTED]

Date of Birth: [REDACTED] Sex: [REDACTED] County of Residency: [REDACTED] Select a County

HDL ID Type: [REDACTED] HDL ID Number: [REDACTED] ID Number: [REDACTED] ID Issue Date: [REDACTED]

Fingerprint/FIS (Fingerprint) or Registration #: [REDACTED] Height(Ft): [REDACTED] Height(Inch): [REDACTED] Weight(Lbs): [REDACTED]

Sex Date: [REDACTED] Hair Color: [REDACTED] Eyes: [REDACTED] Select each color

County of Birth: [REDACTED] State of Birth: [REDACTED] City of Birth: [REDACTED]

Mailing Address: [REDACTED] Mailing Address: [REDACTED] City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]

☐ Please check this box if the mailing address is same as the physical address.

Physical Address: [REDACTED] Physical Address: [REDACTED] City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]

How long have you lived at the above address? Years: [REDACTED] Months: [REDACTED]

Contact Phone Number: [REDACTED] Alternative Phone Number: [REDACTED] Email Address: [REDACTED]

All applicants please read questions thoroughly and answer questions by checking "YES" or "NO".

1. Are you a citizen of the United States?

Yes No

2. Are you a resident of New Mexico OR a transferor of the armed forces release permanent (only applies to transfer to New Mexico or a dependent of such a transfer)?

Yes No

3. Are you 21 years of age or older?

Yes No

4. Have you voluntarily completed a DHS Approved Firearms Safety Training Program or Firearms Training Program?

Yes No

5. Have you been convicted of a felony in New Mexico or any other state or pursuant to the laws of the United States or any other state or pursuant to the laws of the United States or any other jurisdiction?

Yes No

6. Are you currently under indictment for a felony criminal offense in New Mexico or any other state or pursuant to the laws of the United States or any other jurisdiction?

Yes No

7. Are you otherwise prohibited by federal law or the law of any other jurisdiction from purchasing or possessing a firearm?

Yes No

8. Have you been adjudicated incompetent or committed to a mental institution?

Yes No

9. Are you an individual user of, or entitled to, any restricted substance and/or alcohol?

Yes No

10. Have you received a conditional discharge, a diversion or a deferment, or been convicted of plea guilty to, or entered a plea of no contest to a misdemeanor offense involving a crime of violence within the last 10 years?

Yes No

11. Have you, within the three immediately preceding this application, been convicted of a misdemeanor offense involving striking while under the influence of intoxicating liquor or drugs?

Yes No

12. Have you been convicted of a misdemeanor offense involving the possession or abuse of a controlled substance within the last 10 years immediately preceding this application?

Yes No

13. Have you been convicted of a misdemeanor offense involving sexual touching, battery, or battery against a household member?

Yes No

14. Since the first of 18, have you been arrested for any reason?

Yes No

15. Are you a fugitive from justice?

Yes No

16. Are you an officer who is residing in the United States temporarily or a former citizen of the United States who has reacquired citizenship?

Yes No

Upload File:

Upload Required Files to Submission System

Authorization to Release Personal Information compliance with NEW MEXICO DISCLOSED LAWS page after the age of 180 (downloaded from here)

[File Name] No file chosen Reset

Authorization for Release of Information compliance with NEW MEXICO DISCLOSED LAWS page

[File Name] No file chosen Reset

Copy of valid New Mexico Driver's License or Identification Card

[File Name] No file chosen Reset

Copy of Birth Certificate or other respectful legal documents used required to verify a birth date (in PDF)

[File Name] No file chosen Reset

Training Certificate or BPP Approval Document

[File Name] No file chosen Reset

Firearm Possession Receipt (BPP NUMBER REQUIRED)

[File Name] No file chosen Reset

Create Application

Submit Completed Application

Submitting Your Application

Verify information on application

Welcome to the New Mexico Conceal Carry Unit Web Portal

Review Application

Applicant Details

Application Status
NEW

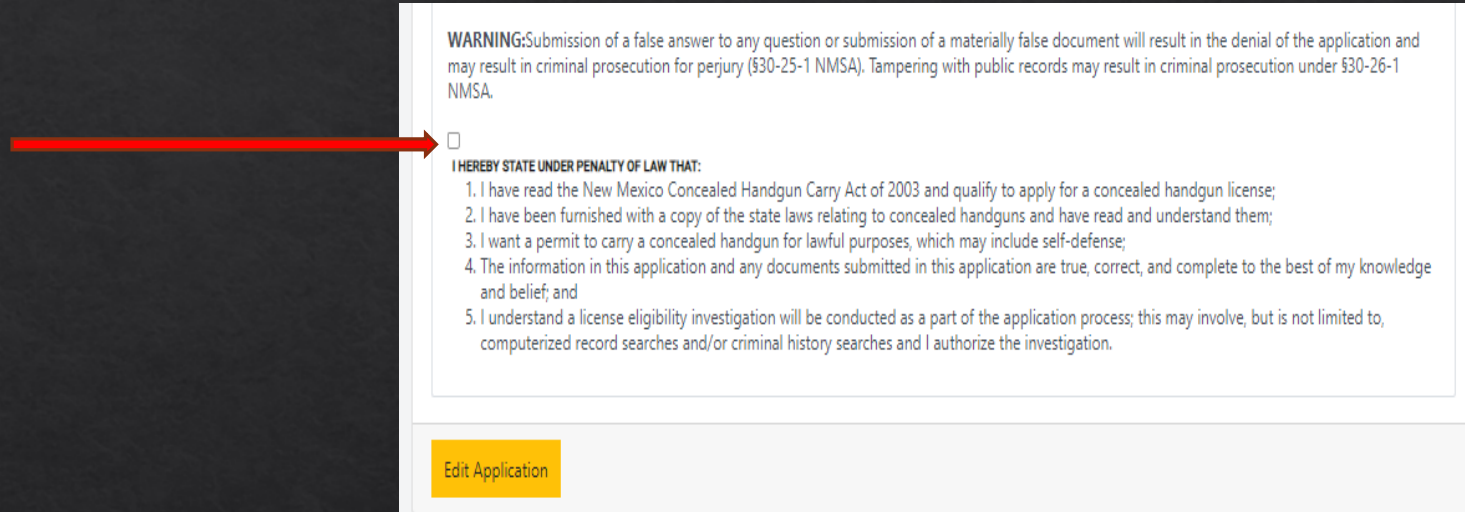
Application Category
Civilian

Full Name STEVE C. ROGERS	Date of Birth 07/04/1942	Sex Male	County of Residency BERNALILLO
NM ID Type NM Real Id	ID Number 123123123	License Issue Date 02/01/2023	
Fingerprint TCN # 1111111111	Height 6 ft 0 Inch	Weight 200 lb	
Eye Color Gray	Hair Color Blond	Race White	
City of Birth ALBUQUERQUE	State of Birth NM	Country of Birth US	
Mailing Address 6301 INDIAN SCHOOL RD ALBUQUERQUE NM 87110	Physical Address 6301 INDIAN SCHOOL RD ALBUQUERQUE NM 87110	How long have you lived at the above address? 2 year(s) 0 month(s)	
Contact Phone Number 505-841-1053	Alternative Phone Number	Email Address antonio.oter@dpn.nm.gov	

1.Are you a citizen of the United States?	YES
2.Are you a resident of New Mexico OR a member of the armed forces whose permanent duty station is located in New Mexico or a dependent of such a member?	YES
3.Are you 21 years of age or older?	YES
4.Have you satisfactorily completed a DPS-Approved Firearms Safety Training Program or Renewal Training Program?	YES
5. Have you been convicted of a felony in New Mexico or any other state or pursuant to the laws of the United States or any other state or pursuant to the laws of the United States or any other jurisdiction?	NO
6.Are you currently under indictment for a felony criminal offense in New Mexico or any other state or pursuant to the laws of the United States or any other jurisdiction?	NO
7.Are you otherwise prohibited by federal law or the law of any other jurisdiction from purchasing or possessing a firearm?	NO
8.Have you been adjudicated incompetent or committed to a mental institution?	NO
9.Are you an unlawful user of, or addicted to, any controlled substances and/or alcohol?	NO
10.Have you received a conditional discharge, a diversion or a deferment, or been convicted of, pled guilty to, or entered a plea of nolo contendere to a misdemeanor offense involving a crime of violence within the last 10 years?	NO
11. Have you, within five years immediately preceding this application, been convicted of a misdemeanor offense involving driving while under the influence of intoxicating liquor or drugs?	NO
12.Have you been convicted of a misdemeanor offense involving the possession or abuse of a controlled substance within the last 10 years immediately preceding this application?	NO
13. Have you been convicted of a misdemeanor offense involving assault, battery, or battery against a household member?	NO
14.Since the age of 18, have you been arrested for any reason?	NO
15.Are you a fugitive from justice?	NO
16.Are you an alien who is residing in the United States illegally or a former citizen of the United States who has renounced citizenship?	NO

Submitting Your Application

Acknowledge the penalty of law by checking box



WARNING:Submission of a false answer to any question or submission of a materially false document will result in the denial of the application and may result in criminal prosecution for perjury (§30-25-1 NMSA). Tampering with public records may result in criminal prosecution under §30-26-1 NMSA.

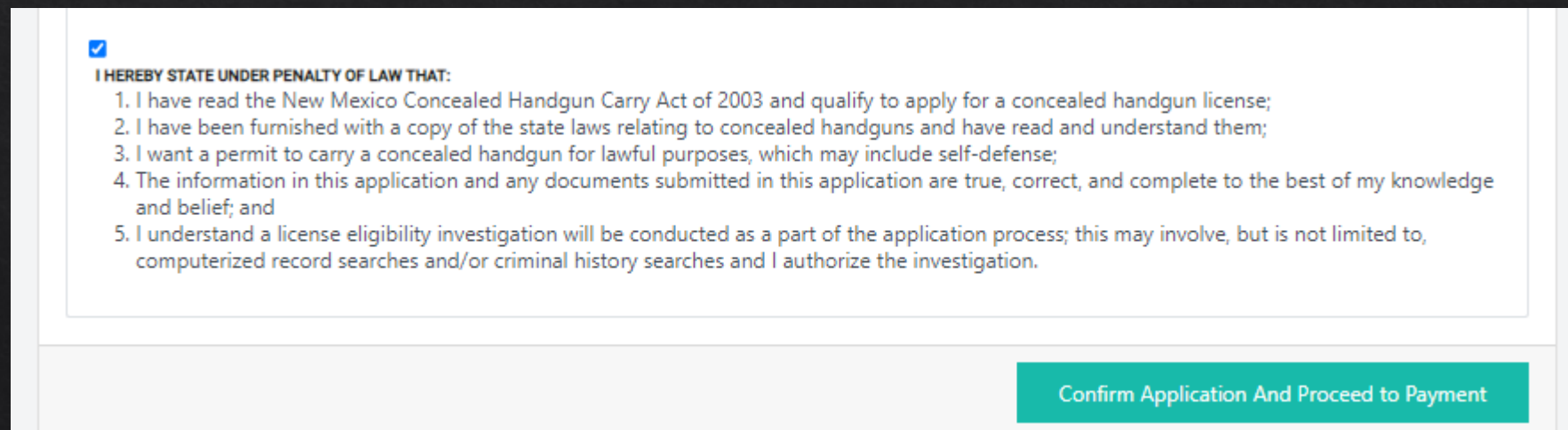
☐

I HEREBY STATE UNDER PENALTY OF LAW THAT:

1. I have read the New Mexico Concealed Handgun Carry Act of 2003 and qualify to apply for a concealed handgun license;
2. I have been furnished with a copy of the state laws relating to concealed handguns and have read and understand them;
3. I want a permit to carry a concealed handgun for lawful purposes, which may include self-defense;
4. The information in this application and any documents submitted in this application are true, correct, and complete to the best of my knowledge and belief; and
5. I understand a license eligibility investigation will be conducted as a part of the application process; this may involve, but is not limited to, computerized record searches and/or criminal history searches and I authorize the investigation.

Edit Application

Confirm application and proceed to payment



☒

I HEREBY STATE UNDER PENALTY OF LAW THAT:

1. I have read the New Mexico Concealed Handgun Carry Act of 2003 and qualify to apply for a concealed handgun license;
2. I have been furnished with a copy of the state laws relating to concealed handguns and have read and understand them;
3. I want a permit to carry a concealed handgun for lawful purposes, which may include self-defense;
4. The information in this application and any documents submitted in this application are true, correct, and complete to the best of my knowledge and belief; and
5. I understand a license eligibility investigation will be conducted as a part of the application process; this may involve, but is not limited to, computerized record searches and/or criminal history searches and I authorize the investigation.

Confirm Application And Proceed to Payment

Submitting Your Application

There are two options for method of payment

1. You can pay online with Debit/Credit Card
 2. You can pay with check by mailing or delivering it to the office
- ❖ Application will not be processed until all fees are received by the department
 - ❖ To reduce delays in processing by paying with a check, the department recommends delivering it to the office with your paper application

Welcome to the New Mexico Conceal Carry Unit Web Portal

Payment Method

Reference Number:	Fee:
2640423	\$ 56.00

☐ Please select this option to mail-in the payment payable to NMDPS CCU

☐ Please select this option to pay with Debit/Credit card

Home

Submitting Your Application

Congratulations!

Your application has been submitted

If you would like to check your application status
You can return to website

You can print your receipt

The screenshot shows a Cybersource receipt page. At the top, the Cybersource logo is displayed with the tagline 'A Visa Solution'. The receipt title 'Receipt' is on the left, and the date 'Date: 01-02-2023' and order number 'Order Number: 2640423' are on the right. Below this, the 'Billing Information' section lists the cardholder's name 'steve Rogers', address '6301 Indian School rd ne', city 'Albuquerque', state 'New Mexico', zip '87110', and country 'United States of America'. The 'Payment Details' section shows the card type 'Card Type: Visa', card number 'Card Number: xxxxxxxxxxxxxx1111', and expiration date 'Expiration Date: 02-2025'. A green box highlights the 'Total amount: \$56.00'. At the bottom, a note says 'Please keep a copy of this receipt for your records'. Two buttons are at the bottom: 'Print' and 'Return to Website'. A red arrow points from the text 'You can print your receipt' to the 'Print' button. Another red arrow points from the text 'You can return to website' to the 'Return to Website' button.

cybersource
A Visa Solution

Receipt Date: 01-02-2023
Order Number: 2640423

Billing Information

steve Rogers
6301 Indian School rd ne
Albuquerque
New Mexico
87110
United States of America

Payment Details

Card Type	Visa	Total amount	\$56.00
Card Number	xxxxxxxxxxxxxxxx1111		
Expiration Date	02-2025		

Please keep a copy of this receipt for your records

[Print](#) [Return to Website](#)

Checking Your Application Status

Log into your account



Welcome to the New Mexico Conceal Carry Unit Web Portal

Log In

Username

SteveRogers

Password

Log In

Create an Account

Forgot Username

Forgot Password

Checking Your Application Status

Select “Track your Application”



Welcome to the New Mexico Conceal Carry Unit Web Portal

[Track your Application >](#)

Personal details

Full Name STEVE C ROGERS	Date of Birth 7/4/1942	Gender Male	Mailing Address 6301 INDIAN SCHOOL RD, ALBUQUERQUE, NM 87110
Contact 505-841-1053	Email Address antonio.otero@dps.nm.gov		

License details

No License data

Application details

Application Number 2640423	Application Status ACTIVE	Category CIVILIAN	Received Date 2/1/2023
--------------------------------------	-------------------------------------	-----------------------------	----------------------------------

Checking Your Application Status

Follow the blue dot indicators to see what stage your application is in

Please allow at least 30 days to pass after the background check has been started before inquiring on the status

Welcome to the New Mexico Conceal Carry Unit Web Portal

Application status [Back](#)

Full Name: STEVE ROGERS Reference number: 2640423 Application status: Fee is valid or unnecessary

Application ready for processing
Status: Completed
Updated date: 2/1/2023

Fee is valid or unnecessary
Status: Completed
Updated date: 2/1/2023

Application was validated
Status: Pending

Background checks started
Status: Event not started

Background checks complete
Status: Event not started

Application was reviewed
Status: Event not started

Application was approved
Status: Event not started

License printed
Status: Event not started

Important Contact Information

NMDPS Concealed Handgun Carry Unit
6301 Indian School Rd NE Suite 310
Albuquerque, NM 87110
(505) 841-8053
NMCC.Instructors@dps.nm.gov

<http://www.dps.nm.gov>

<https://www.dps.nm.gov/top-links-for-nm-residents/concealed-carry-licenses>

Office Hours:
Monday thru Friday 7:00am to 5:00pm



Cont... Important Contact Information

Antonio Otero

Instructor Coordinator

Antonio.otero@dps.nm.gov

(505) 841-2244 office

(505)709-8174 Cell

Angie Cormier

CCU Supervisor

angie.cormier2@dps.nm.gov

(505) 841-2254 Office

(505) 614-4472 Cell





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