



**STATE OF CONNECTICUT**  
**DEPARTMENT OF EMERGENCY SERVICES**  
**AND PUBLIC PROTECTION**  
**DIVISION OF STATE POLICE**  
**Special Licensing & Firearms Unit**



**Bail Enforcement Agent Firearms**  
**Instructor Information Sheet**

Instructor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

**Class Locations:**

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

**Ranges Used:**

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

**ALL INSTRUCTORS MUST SUBMIT A PROPER ADDRESS FOR HOME ADDRESS.**  
**POST OFFICE BOXES WILL NOT BE ACCEPTED**

Phone: (860)-685-8290 Firearms/Permits (860)-685-8160 Licensing Fax: (860)-685-8496

1111 Country Club Road

Middletown, CT 06457

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